

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000057945

**FILED**  
**Oct 24, 2008**  
**Secretary of State**

**Entity Name:** TPG TRADING COMPANY, LLC

**Current Principal Place of Business:**

28 THORNHURST DRIVE  
CARMEL, IN 46032

**New Principal Place of Business:**

**Current Mailing Address:**

28 THORNHURST DRIVE  
CARMEL, IN 46032

**New Mailing Address:**

**FEI Number:** 26-0341348      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SCHWARTZ, GEOFFREY B ESQ.  
1983 CENTRE POINTE BLVD., SUITE 200  
TALLAHASSEE, FL 32308 US

**Name and Address of New Registered Agent:**

THORN III, W. THOMPSON ESQ.  
100 N. TAMPA STREET  
SUITE 1900  
TAMPA, FL 33602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: W. THOMPSON THORN, III, ESQ.

10/24/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CONNOR, NICHOLAS J  
Address: 28 THORNHURST DRIVE  
City-St-Zip: CARMEL, IN 46032

**ADDITIONS/CHANGES:**

Title: TRUS (X) Change ( ) Addition  
Name: CONNOR, NICHOLAS J  
Address: 28 THORNHURST DRIVE  
City-St-Zip: CARMEL, IN 46032

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NICHOLAS J CONNOR

TRUS

10/24/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date