

L080000053697

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(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

OCT 12 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TC 2 Holdings, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Todd E Christensen

Name of Person

TC 2 Holdings, LLC

Firm/Company

1350 Pelham Road

Address

Winter Park, FL 32789

City/State and Zip Code

Todd.Christensen1@gmail.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Todd Christensen

Name of Person

at (321)

689-2966

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 26, 2011

TODD E CHRISTENSEN
TC 2 HOLDINGS, LLC
1350 PELHAM ROAD
WINTER PARK, FL 32789

SUBJECT: TC 2 HOLDINGS, LLC
Ref. Number: L08000053697

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TALLAHASSEE, FLORIDA

We have received your document for TC 2 HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 411A00022093

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: TC 2 Holdings, LLC

2. (a) Principal office address of limited liability company: 1661 Lake Shore Dr

(Note: MUST BE STREET ADDRESS)

Orlando, FL 32803

(b) Mailing address of limited liability company: 1661 Lake Shore Dr

(Note: MAY BE POST OFFICE BOX)

Orlando, FL 32803

5/30/2008

L08000053697

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Todd E Christensen

Registered Office Address:

1661 Lake Shore Dr
Orlando, FL 32803

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**

NEW Registered Agent:

NEW Registered Office Address:

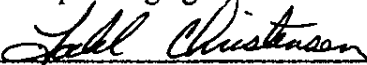
(MUST BE FLORIDA STREET ADDRESS)

1350 Pelham Road

Winter Park, FL 32789

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.



Signature of a member or authorized representative of a member

Todd E Christensen

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00