on of Corporations Electronic Filing Cover Sh

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000125967 3)))



H230001259673ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

√Email Address:

LLC REGISTERED AGENT CHANGE TUUCI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

T. LEMIEUX Help

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: TUUCI, LLC			
2.	(a)		(b	1	
	(-7	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		y	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		11/14/2008		L0800010	
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	CLARKE, DOUGAN			
	• •	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
		1000 SE 8TH STREET			
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
		HIALEAH , FI	<u>. 33010</u>		202
	(b)	Northwest Registered Agent LLC			2023 ACR -4 PK 12: 4
	Enter name of NEW Registered Agent and/or NEW Registered Office add			lress:	, , , , , , , , , , , , , , , , , , ,
		7901 4th St N			
		NEW Registered Office Address:			2:1
		STE 300			÷:- *•
		St. Petersburg , Ft.	33702		
the ag wa	e cha ent v 15/wo	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ability co of the lim -limited li	tered office mpany, it is ited liability iability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
4	/ <mark> /</mark> Signar	ture of a member or authorized representative of a member	Nat	Smith	Printed or typed name of signee
I pr the to	herel ovisi e obl mere	by accept the appointment as registered agent and agroups ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	performo d for in C hereby co	in this capa ince of my a Chapter 605, onfirm that t	icity. I further garee to comply with the
- Ki	gnatu:	Taylor Newman - Assistant Secretar	у		