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TO: Registration Section Division of Corporations

TG INDUSTRIAL LLC

Name of Limited Liability Company

Dear Sir or Madam:

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SUBJECT:

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

Please return all correspondence concerning this matter to the following:

JODY CROWLEY

Name of Person

CORPORATE SERVICE BUREAU INC.

Firm/Company

283 WASHINGTON AVENUE

Address

ALBANY/NY 12206

City/State and Zip Code

jvc@corporatebureau.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JODY CROWLEY Name of Person at (<u>518</u>)

463-8550

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:



\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFF	TICE OR REGISTERED AGENT OR
SOTH FOR LIMITED LIABILITY COMPANY	
Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in ora agent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited ler to change its registered office or registered
1. Name of the limited liability company:	TG INDUSTRIAL LLC
2. (a) Principal office address of limited liability compar-	y: 110 SUMMER STREET
(Note: MUST BE STREET ADDRESS)	STAMEORD CT 06905
(b) Mailing address of limited liability company:	C/O LAW OFFICE OF JEFFREY S
(Note: MAY BE POST OFFICE BOX)	464 NEW YORK AVENUE, SUITE 100 HUNTINGTON NY 11743
11/18/2009	L09000111216
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:	CORPORATE SERVICE BUREAU INC.
Registered Office Address:	515 EAST PARK AVENUE TALLAHASSEE FL 32301
(b) Enter name of NEW Registered Agent and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	CORPORATE SERVICE BUREAU INC.
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1540 GLENWAY DRIVE
	TALLAHASSEE ,FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be iden liability company, it is horeby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability compan Signature of amember or authorized representative of a member JEFFREY DUB:N Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pi and I am familiar with and accept the obligations of my p Chapter 608, F, S. Or, if this document is being filed to m address, I hereby confirm that the limited liability company	Florida street address of the registered office tical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization y. HTT V SCO SCO SCO SCO SCO SCO SCO SCO
Signature of Registered Agent	· · ·

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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