LIO 000037200

(Requestor's Name)							
(Address)							
(Address)							
(Hadioss)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
(Excediment Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



200366399932

US/21/21--01018--026 **25.00

771 MAY 21 PH 5: 23

O SIMMONS JUN 24 2021



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 19, 2021

Order#: 819975/039

Re: TCV I, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

ł.	Nε	nme of the limited liability company: TCV I, LLC					
2	(a)	7807 Baymeadows Road East	(b)				
	(4)	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	(0)	-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Suite 205					
		Jacksonville, FL 32256					
		04/06/2010	L100	L10000037200			
3.		Date of filing/registration in Florida	4.	Document num	ber		
5.	(a)	Feldman & Mahoney, P.A.					
	()	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State;			
		2240 Belleair Road, Suite 210					
		Registered Office Address (MUST BE FLORIDA STREET			644		
						MAH IZE	
	(b)	Clearwater	33764		•	¥ 2	
		FI			·* **		•
					,		;
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:		. •.	Ĉù	٠., ١
						ယ်	
		Corporation Service Company					
		NEW Registered Office Address:					
		1201 Hays Street					
							
		Tallahassee . FI	32301				
cha ago wa the	ange ent w s/we artic	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ward E. Burr	registered offi ability compan of the limited li limited liabilit	ice and the business of y, it is hereby confirm lability company or as y company.	fice of the	e regist e chan	tered ge(s)
		ure of a member or authorized representative of a member	Edward E	Printed or typed na	ma afrian	3.1	
1.1	1		eas to act in thi				miels els
pro the to i not	visio obli mere tifieg	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have writing of this change.	ee to act in int performance of d for in Chapte hereby confirm torporation Se	s capacity. I further a of my duties, and I am j er 605, F.S. Or, if this that the limited liabili cryice Company	gree to co familiar v documen ty compa	ompty v vith an it is bei my has	with the d accept ing filed been
Sig	natur	re of Registered Agent	ami M. Caspe	r, Asst. Vice Preside	nt		