

(Requestor's Name)					
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(OK) Otales Lips Holle "/					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Harrie)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 612516 8406105

AUTHORIZATION : Copinal lade

COST LIMIT : \$ 25.00

ORDER DATE: March 27, 2023

ORDER TIME : 2:20 PM

ORDER NO. : 612516-077

CUSTOMER NO: 8406105

CHANGE OF AGENT

NAME: TROC, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

, 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. N	ame of the limited liability company:TROC, LLC			
2. (a)	800 S. DOUGLAS ROAD SUITE 450	(b	800 S. DOUGLAS ROAD	SUITE 450
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of li		mited liability company: POST OFFICE BOX)
	CORAL GABLES, FL 33134	_	CORAL GABLES, FL 3313	34
3.	08/26/2011 Date of filing/registration in Florida	 4.	L11000098733 Document numb	er
5. (a)	Registered Agent and Registered Office shown on the records of t Cesar Gomez P.A.	the Florida	a Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		<u> </u>	202
	12001 sw 119 Street			
	Miami . FL	33186		R 27
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	dress:	MID: 16	
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee, FL_	32301		
change agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the limited liability.	registere bility co f the lim	ed office and the business off ompany, it is hereby confirme nited liability company or as	fice of the registered ed that the change(s)
	/s/ Brett Beveridge	Bret	tt Beveridge, Authorized Pers	son
Signa	nture of a member or authorized representative of a member		Printed or typed na	me of signee
provis the ob- to mer notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ee to act performa I for in C ereby co	in this capacity. I further as ance of my duties, and I am f Napter 605, F.S. Or, if this o Onfirm that the limited liabili.	gree to comply with the amiliar with and accept document is being filed ty company has been
	Maca Cokubby Grace E. Kirby, Asst. Vice Pres	sident		