

L12 0000060381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. CLINE

JUL - 3 2012

EXAMINER

**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: TRULY GLOBAL, LLC

2. (a) Principal office address of limited liability company: 11 WEST HARDING STREET

(Note: **MUST BE STREET ADDRESS**)

UNIT A  
ORLANDO FL 32806

(b) Mailing address of limited liability company: SAME

(Note: **MAY BE POST OFFICE BOX**)

05/04/12  
3. Date of filing/registration in Florida

L12000060381  
4. Document number

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

Registered Agent: TARABA, PAUL E

Registered Office Address: 11 WEST HARDING STREET  
UNIT A  
ORLANDO FL 32806

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

**NEW Registered Agent:** TARABA, JARMILA

**NEW Registered Office Address:** 11 WEST HARDING STREET  
UNIT A  
ORLANDO FL 32806  
(**MUST BE FLORIDA STREET ADDRESS**)

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.

x Juica Taraba  
Signature of a member or authorized representative of a member

JARMILA TARABA  
Printed or typed name of signer

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.

x Juica Taraba  
Signature of Registered Agent

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