## 420016/334

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

Office Use Only



000441215070

2024 DEC 18 PM 2: 01 SEALL WASSEE, FL

7024 DEC 18 AMT1: 17

## 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: TCG COMPLIA   | NCE CO  | N:                                 | DNSULTING, LLC   |                 |  |
|---------------------|---------------------|--|---|------------------------------------|--|-----------------|--|
| 2. (                | (a)                 |  | <i>(</i> 1                                      | b)                                 | b)   |                 |  |
| (                   | ()                  | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   |   | -,                                 | Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  |                 |  |
|                     |                     | 11300 Switzer Road   |   |                                    | 11300 Switzer Road   |                 |  |
|                     |                     | Overland Park, KS 66210  | _   | ,                                  | Overland Park, KS 66210  |                 |  |
|                     |                     | 12/27/2012   |   | l                                  | L12000161334   |                 |  |
| 3.                  |                     | Date of filing/registration in Florida   | 4.  |                                    | Document number  |                 |  |
| 5.                  | (a)                 |  |   |                                    |  |                 |  |
|                     | • •                 | Registered Agent and Registered Office shown on the records of SMITH, DARRELL C. ESQ   | a Dept. of State:                               |                                    |  |                 |  |
|                     |                     | Registered Office Address (MUST BE FLORIDA STREET.   | <u>s</u> ;                                      |                                    |  |                 |  |
|                     |                     | 101 E. KENNEDY BLVD., STE. 2800  |   |                                    |  |                 |  |
|                     |                     | TAMPA , FL   | 33602   |                                    |  |                 |  |
|                     |                     |  |   |                                    |  |                 |  |
| (                   | (b)                 | Enter name of NEW Registered Agent and/or NEW Registered Office address:   |   |                                    | 2024<br>Till 24  | _               |  |
|                     |                     | Corporation Service Company  |   |                                    | Notes Section 18 Secti |                 |  |
|                     |                     |  |   |                                    |  | ####            |  |
|                     |                     | NEW Registered Office Address:   |   |                                    | ν. – ο <sup>‡</sup>  |                 |  |
|                     |                     | 1201 Hays Street   |   |                                    | SSEE   |                 |  |
|                     |                     |  |   |                                    | 2: 08  |                 |  |
|                     |                     | Tallahassee , FL   | 32301   |                                    |  |                 |  |
| cha<br>age<br>was   | nge<br>nt v<br>s/we | imited liability company is not organized under the law<br>or changes are made, the Florida street address of the<br>will be identical. Or, in the case of a Florida limited lia-<br>ere authorized by an affirmative vote of the members of<br>cles of organization or the operating agreement of the | registere ability co                            | ed<br>om<br>nit                    | ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in  |                 |  |
| /S/ Robert C. Weber |                     |  | Rot   | Robert C. Weber, Authorized Person |  |                 |  |
|                     | _                   | ture of a member or authorized representative of a member  |   |                                    | Printed or typed name of signee  |                 |  |
| pro<br>the<br>to n  | visi<br>obl<br>nero | 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 provide ely reflect a change in the registered office address. It is writing of this change.   | ee to act<br>perform<br>d for in (<br>hereby co | t ir<br>ari<br>Ch<br>on            | t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accellabler 605. F.S. Or, if this document is being file onfirm that the limited liability company has been   | ie<br>Ppt<br>Pd |  |
|                     |                     | re of Registered Agent   |   |                                    |  |                 |  |
| Gr                  | ace                 | F. Kirby, Asst. Vice President   |   |                                    |  |                 |  |