

L13000156477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

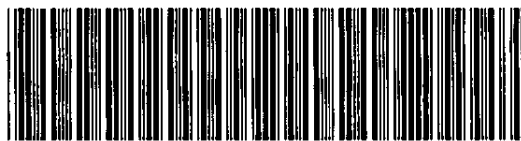
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 APR 29 PM 4:41
TOLSON, D. C. R.

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DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2014

MICHAEL J. COKER
TRUTECHNOLOGY, LLC
2657 WINDMILL PARKWAY #263
HENDERSON, NV 89074

SUBJECT: TRUTECHNOLOGY, LLC
Ref. Number: L13000156477

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II

Letter Number: 314A00007901

✓

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TruTechnology, LLC

Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Michael J. Coker

Name of Person

TruTechnology, LLC

Firm/Company

2657 Windmill Parkway #263

Address

Henderson, NV 89074

City/State and Zip Code

mjc@noyfb.biz

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael J. Coker

Name of Person

at (512) 922-0582

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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: TruTechnology, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

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

3030 N. Rocky Point Dr., Suite 150A

Tampa, FL 33607

Mailing address of limited liability company:

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

3030 N. Rocky Point Dr., Suite 150A

Tampa, FL 33607

November 6, 2013

L13000156477

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:

Andrew Farber, Esq.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

20283 State Road 7, Suite 300

Boca Raton, FL 33498

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

Registered Agents, Inc.

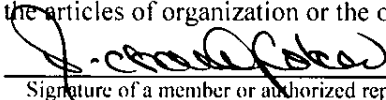
NEW Registered Office Address:

3030 N. Rocky Point Dr., Suite 150A

Tampa, FL 33607

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14 APR 29 PM 4:41
TALLAHASSEE, FL

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.

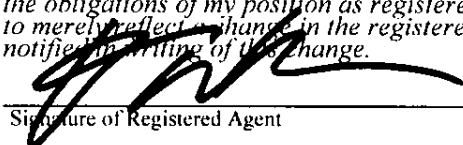


Signature of a member or authorized representative of a member

Michael J. Coker, Managing Member

Printed or typed name of signee

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 605, 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 the change.



Signature of Registered Agent