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COVER LETTER

	gistration Section vision of Corporations			
SUBJECT	TNT Rhythm, LLC			
SOBOLET	Name of Limited Liability Company			
Dear Sir or	Madam:			
The enclose	ed Registered Agent/Registered	Office Change and f	fee(s) are submitted for filing.	
Please retur	m all correspondence concerning	this matter to the fo	ollowing:	
Laura Gaski	ill			
	Name of Person			
Gaskill Law	Firm PA			
	Firm/Company		_	
1800 Second	d Street, Suite 765			
	Address		_	
Sarasota, Flo	orida 34236			
	City/State and Zip Cod	ie		
laura@gask	illpa.com			
E-mai	il address: (to be used for future	annual report notific	cation)	
For further	information concerning this mat	tter, please call:		
Laura Gaski	ill	941 at (867-0701	
	Name of Person	ut (Area Code & Daytime Telephone Number	
Reg Div P.C	gistration Section vision of Corporations D. Box 6327 Hahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
En	closed is a check for the follow	ing amount:		
X	\$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy	

INHS18 (2/14)

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.

2. (a)		(b)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	ı	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	(Note: MUST BE STREET ADDRESS) 4414 Bee Ridge Road Sarasota, FL 34231		4414 Bee Ridge Road Sarasota, FL 34231	
	03/14/2016		L16000052	2007
3.	Date of filing/registration in Florida	<u>4</u> .		Document number
5. (a)				_
	Registered Agent and Registered Office shown on the records of Tiana Ramirez	the Florida	Dept. of State	e:
	Registered Office Address 5916 5th Ave N . Apt B8	ADDRESS	2	-
	St. Petersburg , FI	33710		2021
/1-X				7024 AUG -1
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	dress:	FILED PA
	Gaskill Law Firm, PA			PHIZ: 1
	NEW Registered Office Address:			
	1800 Second Street, Suite 765			- -
	Sarasota . Fl	34236		
change agent was/w was/w che art	imited liability company is not organized under the la c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- cre authorized by an affirmative vote of the members icles of organization or the operating agreement of the nume of a member or authorized representative of a member by accept the appointment as registered agent and again	e registere ability co of the lim limited l Tian	d office and mpany, it is ited liability com a Ramirez	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany. Printed or typed name of signee

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT	TNT Rhythm, LLC		
		e of Limited	Liability Company
Dear Sir or	Madam:		
The enclos	ed Registered Agent/Registered Offi	ce Change a	nd fee(s) are submitted for filing.
Please retu	rn all correspondence concerning thi	s matter to the	ne following:
Laura Gask	ill		
	Name of Person		
Gaskill Lav	v Firm PA		
	Firm/Company		
1800 Secon	d Street, Suite 765		
	Address		
Sarasota, Fl	lorida 34236		
	City/State and Zip Code		
laura@gask	tillpa.com		•
E-ma	il address: (to be used for future ann	ual report no	tification)
For further	information concerning this matter,	please call:	
Laura Gask	ill	941 at (867-0701
	Name of Person	# (Area Code & Daytime Telephone Number
Re Di P.(ailing Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
En	closed is a check for the following	amount:	
×	\$25 Filing Fee		\$55 Filing Fee & Certified Copy
INHS18 (2/	14)		

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.

i. Na	une of the limited liability company: TNT Rhythm, LI	.c 		
. (a)			(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)
	4414 Bee Ridge Road			4414 Bee Ridge Road
	Sarasota, FL 34231			Sarasota, FL 34231
	03/14/2016		I	.16000052007
	Date of filing/registration in Florida	4.		Document number
. (a)				
()	Registered Agent and Registered Office shown on the records of	the Flori	da I	Dept. of State:
	Tiana Ramirez			<u> </u>
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	SS)	- B
	5916 5th Ave N, Apt B8			THE TI
	St. Petersburg	33710		2021 AUG -1 PM 12: 13
				
(b)				15 N
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddı	ess:
	Gaskill Law Firm, PA			
	NEW Registered Office Address:			
	1800 Second Street, Suite 765			
	Sarasota	34236		
	,,,FI			
hange gent v vas/we	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability of of the li limited	red om mit lia	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
Signa	hare of a member or authorized representative of a member			Printed or typed name of signee
rovisi he obl o mere	by accept the appointment as registered agent and agr ons 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, I d in writing of this change.	ree to a perforn d for in hereby	et in nan Ch con	this capacity. I further garee to comply with the

Signature of Registered Agent