# 1600095811

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# **COVER LETTER**

10:	Division of Corporations			
SUBJ	ECT: National TMA LLC Nam			
	Nam	e of Limite	d Liability Company	
Dear S	Sir or Madam:			
The en	nclosed Registered Agent/Registered Offi	ce Change	and fee(s) are submitted for filing.	
Please	return all correspondence concerning thi	s matter to	the following:	
	Michael Caffrey Name of Person	······································		
	Name of Person			
	National TMALCC Firm/Company			
,	Firm/Company			16.0
	3501 S. Sanford Ave			16 OCT 19
	Address			9
				PM 5: 08
	San ford, 72 32773 City/State and Zip Code			C)
	City/State and Zip Code			ထ
	Cgante traffic solutions fl E-mail address: (to be used for future annumentation)	Corn		
Ŧ	E-mail address: (to be used for future annu	ual report r	otification)	
For fu	rther information concerning this matter,	please call		
	Caren Gant	at ( '321	) 332 -134/	
	Name of Person	_ at (	Area Code & Daytime Telephone	Number
	STREET/COURIER ADDRESS:		MAILING ADDRESS:	
	Registration Section		Registration Section	
	Division of Corporations		Division of Corporations	
	Clifton Building		P.O. Box 6327	
ţ	2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314	
	Enclosed 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.

ı.	Na	me of the limited liability company: National	[mA	LL	<u> </u>				
2 1	(a)	Northand TMA, LLC		<i>(</i> h)	Nation	al Tm	A. L	.LC	
۷. ۱	(a)	Principal office address of limited liability company:	_	(U) _				d liability compar	nv.
		(Note: MUST BE STREET ADDRESS)				_		T OFFICE BOX	-
		3001 Industrial Ave 3	_		3001	Indust	r.al	Ave 3	
		Fort Pierce, FL 34946		_	Fort	Pierce	Fr	34946	<del></del>
		May 16, 2016			4160	000 958/	1		
3.		Date of filing/registration in Florida	4.		D	ocument nu	mber		
5	(a)	David warner						•	
٥.	(4)	Registered Agent and Registered Office shown on the records of t	he Flori	da De	pt. of State:				
					•				
		National TMA, LLC Registered Office Address (MUST BE FLORIDA STREET)	IDDDF	(22					
				<u> </u>					
		3001 Industial Ave 3							SO.
		Fort Pierce ,FL		349	46			16 OCT 19	LCR.
,	ኬነ	Robert Tolle						<del></del>	
,	UJ	Enter name of NEW Registered Agent and/or NEW Registered	Office s	ddres	<b>IS</b> :				82E
					<del></del>			PH	- 19c
		National TinA. LLC						က္	24
		NEW Registered Office Address:						80	SA
		3501 S. Sanford Ave							** ;
					_				
		San ford, FL	ろと	77]	3				
si the state of th	cha nt w /we arti- grat grat ereli oblinere	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liare authorized by an affirmative vote of the members of cless of organization or the operating agreement of the ure of a member or authorized representative of a member on a complete of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and complete in writing of this change.	the regability of the li	gister comp mited I liab	red office are pany, it is he described liability companion of the liabilit	nd the busing creby confictions or company or confictions.  Caffrinted or typed	ness of rmed thas other	fice of the reg hat the change crwise provide of signee	cistered c(s) cd in
		M							
Sign	atur	e of Registered Agent							
15	Op	ert Tolle Division of Cornerations P.O. F	tov 42	27-1	rallahassa:	o ET 2221	4		

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

# Electronic Articles of Organization For Florida Limited Liability Company

L16000095811 FILED 8:00 AM May 16, 2016 Sec. Of State mtmoon

# Article I

The name of the Limited Liability Company is: NATIONAL TMA,LLC

Article II									
The street address of the principal office of the Limited Liability Company is:									
FORT PIERCE, FL. UN 34946	Address								
The mailing address of the Limited Liability Company is	:								
ON JOON PIERCE/FL/UN 34946	16 O								
article III	OCT 1								
The name and Florida street address of the registered age	int is:								
DAVID WARNER  3001 INDUSTRIAL AVENUES  FORT PIERCE, FL. 34946  Sanford	vie meil formen								
	The state of the s								

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DAVID-WARNER

Robert C. Tolle

**Article IV** 6000095811 FILED 8:00 AM May 16, 2016 Sec. Of State The name and address of person(s) authorized to manage LLC: Title: MGR mtmoon DAVID WARNER 3001 INDUSTRIAL AVENUE 3 FORT PIERCE, FL. 34946 UN Title: MGR MARTIN WARNER 3001 INDUSTRIAL AVENUE 🖇 Remo FORT PIERCE, FL. 34946 UN Title: MGR ROBERT C TOLLE 3001 INDUSTRIAL AVENUE 3 FORT PIERCE, FL. 34946 UN Title: MGR MICHAEL CAFFREY (3001 INDUSTRIAL AVENUE 3 onald and FORT PIERCE, FL. 34946 UN Article V The effective date for this Limited Liability Company shall be: 05/16/2016 Signature of member or an authorized representative Electronic Signature: DAVID WARNER Sobort I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.



#### Kelly Farnham < kfarnham@trafficsolutionsfl.com>

### **Entity Changes - National TMA**

1 message

Kelly Farnham <kfamham@trafficsolutionsfl.com>

Thu, Sep 29, 2016 at 11:59 AM

To: CorpAddressChange < corpaddresschange@dos.myflorida.com>

Cc: Chase Tolle <ctolle@trafficsolutionsfl.com>

Bcc: Kelly Famham <kfamham@trafficsolutionsfl.com>

Good morning,

Please make the following changes for National TMA LLC, document #L16000095811:

Principal Office Street Address is now: 3501 S. Sanford Ave. Sanford, FL 32773

Mailing Address is now: 3501 S. Sanford Ave. Sanford, FL 32773

Authorized Managers: \*Delete David Warner

\*Delete Martin Warner

\*Robert Tolle - update address to: 3501 S. Sanford Ave. Sanford, FL 32773

\*Michael Caffrey - update address to: 3501 S. Sanford Ave. Sanford, FL 32773

I will also be mailing in the completed form and a check to change the registered agent.

Thank you,

Kelly Farnham Traffic Solutions 3001 Industrial Ave. Three Fort Pierce, FL 34946 (772) 905-3351 TALLAHASSIE, FLORIDA