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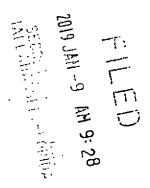
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

TO:	Registration Of	n Section Corporation:	s						
SUBJI	ECT:	TOWER	SALES	COACHI	Nb	AND	TILAJVINO Company	, LLC	
			N	ame of Lin	nited L	iability	Company		
Dear S	ir or Madam	:							
The en	closed Regis	tered Agent/l	Registered C	Office Char	ige and	l fee(s)	are submitted	for filing.	
Please	return all co	rrespondence	concerning	this matter	to the	follow	ing:		
	/ 44.	RENCE	BousH						
-		Name o	f Person						
	TOWER	SAUES	COACHING	r BOD	THIL	1126	LLC		
		Firm/Co	ompany	·		_ ′			
	146	EXECUTIV	E CINCU	Ē					
•		Addre	SS						
	Bo	YNTUN B	EACH, F	EL 334	136				
		City/State a	nd Zip Code						
	BAUSH	1. LARRY	@ YAHO	10. CoM					
E	-mail addres	s: (to be used	for future a	nnual repo	rt notif	fication)		
For fur	ther informa	tion concerni	ng this matte	er, please o	all:				
4	ARRY BI	evsH		at (920)	412-0	484	
	Na	me of Person				Area	Code & Dayt	ime Telephone Number	
	STREET/C	COURIER A	DDRESS:		M	AILIN(G ADDRESS	:	
Registration Section				Registration Section					
Division of Corporations				Division of Corporations					
Clifton Building					P.O. Box 6327				
		itive Center (c. Florida 323			Ta	llahass	ee, Florida 32.	314	
	Enclosed is	s a check for	the following	ng amoun	t:				
	S25 Filir	ng Fee			□ \$:	55 Filin	g Fee & Certi	fied Copy	
INHS18	8 (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.

1. Na	ime of the limited liability company: TOWER SALES COACHING AND TRAINING, LLC
2. (a)	146 EXECUTIVE CIRCLE (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)
	BOYNTON BEACH FL 33436
	L17000017904
3.	Date of filing/registration in Florida 4. Document number
5. (a)	NITED STATES CONFORATION AGENTS, INC. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: // 3302 WIND OAK CONF A Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	registered office (Marcis) Internal Property of the Control of the
(b)	TAMPA ,FL 33611 LAWKENCE G. BRUSH Enter name of NEW Registered Agent and/or NEW Registered Office address: 146 EXECUTIVE CIRCLE NEW Registered Office Address:
	BOYNTON BEACH FL 33436
Signa I here provisithe oblito mercinotifies	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after inge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company. Awkede G. Brust Printed or typed name of signee