Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180000968373)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone Fax Number : (323)962-8600 : (323)962-3889

Enter the email address for this business entity to be used for futura annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE TRCG, LLC

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INHS18 (2/14)

• COVER LETTER				
	istration Section	,		
UIVI	ision of Corporations	. ·		
SUBJECT:	TRCG, LLC	•		
Bobonet.	Name of Limited Liability Company			
Dear Sir or l	Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please retur	n all correspondence concerning this matter to	the following:		
Cheyenne	e Moseley			
	Name of Person			
Legalzoo	m.com, Inc.			
	Firm/Company			
101 N. Br	and Blvd., 10th Floor			
	Address			
Glendale	, CA 91203			
	City/State and Zip Code			
jeff@trcg	global.com			
Ē-mai	l address: (to be used for future annual report	notification)		
For further	information concerning this matter, please cal	t: re		
Cheyenn	e Moseley 800	773-0888 ext 9724		
	Name of Person	Area Code & Daytime Telephone Number		
Re	REET/COURIER ADDRESS: gistration Section vision of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		
Cli 26	Itton Building 61 Executive Center Circle Itahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314		
En	closed is a check for the following amount:			
n	\$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. N	lame of the limited liability company: TRCG, LLC			
		(b)		
(/	Principal office address of limited limbility company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	1721 HUNTER LANE	17	21 HUNTER LANE	
	TARPON SPRINGS, FL 34689	1-1-4	TARPON SPRINGS, FL 34689	
	03/24/2017		7000067828	
3.	Date of filing/registration in Florida	4.	Document number	
5. (n	IEEEDEV A MACHDIIDNI			
3. (u	Registered Agest and Registered Office shown on the records of	the Florida Dept	. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		=	
	1721 HUNTER LANE		<u> </u>	
	TARPON SPRINGS , FI	34689		
(b)			FILE DE STATE CRETARY OF STATE FLORID	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	FLST 8	
	UNITED STATES CORPORATION AGENT	S, INC.	ATE ORID	
	NEW Registered Office Address:			
	13302 WINDING OAK COURT, SUITE A			
	TAMPA , FL	33612		
the ch agent was/w the ari	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ligger authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the State the registered ability compa of the limited limited liabil	e of Florida, it is hereby confirmed that after d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in	
Sigh	Heffley A Wash true of a member	<u> </u>	Printed or typed name of signee	
I here provis the ob to men notifie	why accept the appointment as registered agent and agreements of all statutes relative to the proper and complete ingalians of my position as registered agent as provide rely reflect a change in the registered office address, I is all friting of this change. CHEYENDE MOSIBLEY, ASSISTANT SECRETAR STATES CORPORATION AGENTS, INC. We of Registered Agent	ree to act in the performance of for in Chap hereby conjurt	. ,,	