## Florida Department of State Wissign of Copporations Electronic Ging Cover Sheet

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Te:Division of Corporations Fax Number : (850)617-6383 From: Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A. Account Number : 076424003301 : (813)223-7474 : (813)227-0435 Fax Number \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*  $\overline{\mathbf{x}}$ Email Address: tgood@trenam.com LLC REGISTERED AGENT CHANGE TRIFECTA NETWORKS, LLC Certificate of Status Certified Copy 1 01 Page Count \$55.00 Estimated Charge Help

> O SIMMONS SEP 1 0 2018

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## 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: Trifecta Net	tworks, LLC	
2. (a)	4007 Tamas Dand	(b) 4027 Tampa Road	
_, (,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing uddress of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Oldsmar, FL 34677	Oldsmar, FL 34677	
	1/22/2017	L170002	241292
3.	Date of filing/registration in Florida	4.	Document number
5. (a	Capitol Corporate Services, Inc.		
	Registered Agent and Registered Office shown on the records of 515 E. Park Avenue	of the Florida Dept, of Sta	ate:
	Registered Office Address		
	Floor 2		
	Taliahassoe , ,		
(b)	TK Registered Agent, Inc.		88 FT
	Enter name of NEW Registered Agent und/or NEW Register.	ed Office address:	题 1. 二
	101 E. Kennedy Boulevard		SEP-7 M
	NEW Registered Office Address:		27. 9
	Suite 2700		والمستريد والمراجع المراجع الم
	Tampa , F	<sub>1.</sub> 33602	
the ch agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited of k authorized by an affirmative vote of the members lieles of organization or the operating agreement of the	laws of the State of F of the registered offic liability company, it is of the limited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
	1/2	Chris Toepk	e, Authorized Member
I here provis the ob to mer notivic	mure of a mainber. Hauthorized representative of a member rby accept the appointment as registered agent and a jons of all statutes relative to the proper and comple ligations of my taxiting its registered agent as provided a factorized agent as provided a factorized of the change in the registered office address, all in writing of this change.	しか バルンプロンカイバンシベル へんついい	i duties, and Lain tamition with ima accept
១វឌ្ឍវង្គ	me, or verbusine Whom		

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