UPFIRM 13:55 11/06/20 //etile.sund Division of Corporations Florida Department of State Division of Corporations Electronic Filing Cover Sheet 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. (((H180003199283))) H180003199283ABC8 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. 2018 TO: Division of Corporations NON : (850)617-6383 Fax Number From: , di Account Name : JOHNSON, POPE, BOKOR, RUPPEL & BORN Account Number : 076666002140 רדן A : (727)461-1818 Phone : (727)441-8617 Fax Number ö **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** LINDAB@JPFIRM.COM Email Address: : ; LLC REGISTERED AGENT CHANGE MARTINI'S OF TRINITY LLC ÷, 5 - 6 - 6 - 4 + 4 anetstanas<u>austen uutstat</u>uus <u>.</u> Certificate of Status 0 T. CLINE Certified Copy 0 2 - YOM 3105 NOV -7 2018 02 Page Count \$25.00 Estimated Charge EXAMINER

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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.

	6 110
i. Name of the limited liability company: harting of TVI	
	148 Carporate Conta Drive
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
0 dessa, F1 33556 0	Jole289, F1 33.556
June 19 7018	L18000150782
3. Date of filing/registration in Florida 4.	Document number
The Annual	
5. (a) Sacquellin ISavveri Registered Agent and Registered Office shown on the records of the Florida Dept. of	State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
2148 Corporate Center Dr Trinity, FL 34655	· · · · · · · · · · · · · · · · · · ·
True 1 34655	-
(b) Robert U. Potter	
Enter name of NEW Registered Agent and/or NEW Registered Office address:	ASSE
all chesturt Orive	n chi
NEW Registered Office Address:	
Clearwater El 33756	
Clear With the Street	<u> </u>
ѓя	
If the limited liability company is not organized under the laws of the State of the change or changes are made, the Florida street address of the registered of	trice and the pusiness office of the registered
agent will be identical. Or, in the case of a Florida limited liability company, was/were authorized by an affirmative vote of the members of the limited lial	, it is nereby confirmed that the change(s).
the articles of organization or the operating agreement of the limited liability	company
Jacquelin Barnett J	Printed or typed name of signee
Signature of a member or authorized representative of a member	
I hereby accept the appointment as registered agent and agree to act in this provisions of all statutes relative to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter to merely reflect a change in the registered office address. I hereby confirm to position as the college	my duties, and I am familiar with and acception of the second sec
the obligations of my position is registered agent is provided for in Chapter to merely reflect a change in the registered office address. I hereby confirm to notified in a of the office address of the confirmation of the second second second second second second second	that the limited liability company has been
notified in writing of this change.	
Signature of Registered Agent	
Division of Corporations. P.O. Box 6327. Tall	abassee, FL 32314
FILING FEE: \$25.00	
INHS18 (2/14)	