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From:

Account Name : REGISTERED AGENTS INC.

Account Number: I20090000081

Phone

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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Date of filing/registration in Florida CORTES, LEVI Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7901 4TH ST N Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7901 4TH ST N Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7901 4TH ST N Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Office address: 7901 4th St N NEW Registered Office Address: STE 300 St. Petersburg Fl. 33702 If the limited liability company is not organized under the laws of the State of Florida, it is hereby continued that after the change or changes are made, the Florida street address of the registered office and the business office of the registere agent will be identical. Or in the case of a Florida limited liability company, it is hereby confirmed that the changes was was were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of registeries and agreement of the limited liability company or as otherwise provided in the articles of registeries and agreement of the limited liability company or as otherwise provided in the articles of registeries and agreement of the limited liability company or as otherwise provided in the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for me Chapter 605; F.S. Or, if this dop	i. Na	nne of the limited liability company: TRON CAPITAL LU	_C	
Principal office address of limited liability company: (Nate: MIST BE STREET ADDRESS) Date of filing/registration in Florida Document number CORTES, LEVI Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7901 41H S1 N Registered Office Address [MIST BE FLORIDAL STREET ADDRESS] 300 ST. PETERSBURG FL. 33702 Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Office address: 7901 4th S1 N NEW Registered Office Address: STE 300 St. Petersburg FL. 33702 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the changet's was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Robin Jones Finance or another on unfluited registered agent and agree to act in this capacity. Flurther agree to comply with the provisions of all stantes relative to the proper and complete performance of my duties, and an inmiliar with and accept the adjustical provisions of all stantes relative to the proper and complete performance of my duties, and an inmiliar with and accept the adjustical provisions of all stantes relative to the proper and complete performance of my duties, and an inmiliar with and accept the adjustical provisions of the registered agent as provided for in Chapter 603. F.S. Or, if this document is being file. Printed or complete the registered agent as provided for in Chapter 603. F.S. Or if this document is being file.	2. (a)		(b)	
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