12/13/2016

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.

(((H16000304690 3)))



H160003046903ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PARANET CORPORATION SERVICES, INC.

Account Number : I20090000069

Phone

: (800)277-9977

Fax Number

: (800)815-0477

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

Email Address: SBrewer@annualregistration.com

LLC REGISTERED AGENT CHANGE PCG TRADING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25,00

Electronic Filing Menu

Corporate Filing Menu

S Warren

DEC 14 2016

(FAX)

P.011/012

(((H16000304690 3)))

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	PCG TRADING, LLC			
	Name of Limited Liability Company			
Dear S	Sir or Madam:	·		
The e	nclosed Registered Agent/Registered Offic	e Change and f	fee(s) are submitted for filing.	
Please	e return all correspondence concerning this	matter to the f	bllowing:	
MICI	HAEL CASALE			
	Name of Person	· · ·	<u>. </u>	
PCG	TRADING, LLC			
	Firm/Company		_	
4 TE	CHNOLOGY DRIVE			
	Address	,		
PEA	BODY, MA 01960			
	City/State and Zip Code	<u> </u>		
sbre	wer@annualregistration.com			
	E-mail address: (to be used for finure annu	ial report notifi	cation)	
For fo	urther information concerning this matter,]	please call:		
URS	Agents C/O Kanetha Bishop	800 at (567-4397	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	M.A	AILING ADDRESS:	
Registration Section Division of Corporations		4 .	sistration Section	
			rision of Corporations	
	Clifton Building), Box 6327	
	2661 Executive Center Circle	Tai	lahassee, Florida 32314	
	Tallahassee, Florida 32301			
	Enclosed is a check for the following	amount:		
	2 \$25 Filing Fee	□ \$5	5 Filing Pec & Certified Copy	
INHS	18 (2/14)		•	

12/13/2016 10:59

(FAX) P.012/012 (((E16000304690 3)))

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 i	ame of the limited liability company: PCG TRADIT	NG, LLC		
2. (a)	•	(b)_	·	
a. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		
	9201 E. DRY CREEK ROAD	ę	9201 E. DRY CREEK ROAD	
	CENTENNIAL, CO 80112		CENTENNIAL, CO 80112	
	07/03/2003	M	03000002182	
3.	Date of filing/registration in Florida	- 4	Document number	
5. (a)				
). (a)	Registered Agent and Registered Office shown on the records of	fthe Piorida D	ept. of State:	
	NRAI SERVICES, INC			
	Registered Office Address MUST BE FLORIDA STREET	ADDRESS)	7	
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION	L 33324		
	F EARLY TOIL	L	· 	
(p)	Enter name of NEW Registered Agent and/or NEW Registore	d Office addr	ration of the same	
			(1)	
	URS AGENTS, LLC			
	NEW Registered Office Address:		NAME OF THE PERSON OF THE PERS	
	3458 LAKESHORE DRIVE		in τη της της της της της της της της της	
	TALLAHASSE	L32312	- 100 A	
•	, r.	Lo .	TATE ORID	
If the	limited liability company is not organized under the la ange or changes are made, the Florida street address o	ws of the S	tate of Florida, it is hereby confirmed that after	
agent	will be identical. Or, in the case of a Florida limited is vere authorized by an affirmative vote of the members	iability con	red office and the business office of the registered upany, it is hereby confirmed that the change(s)	
was/u	vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the limit	ed liability company or as otherwise provided in	
7	Market D. A.		ael Casale, VP of Global Taxation	
Sign	ature of a member or authorized representative of a member	14001	Printed or typed name of signice	
_	thy accept the appointment as registered agent and actions of all statutes relative to the proper and completifications of my position as registered agent as providing the reflect a change in the registered office address, I all myriting of this change.	gree to act in e performan ea for in Ch I hereby con		
Signat	Kenethe Blahap, Assistant Socretary			

Division of Corporations • P.O. Box 6327= Tallahassee, FL 32314 FILING FEE: \$25.00