## M0700005956

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE

MAR 8 2011

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Division of	Section Corporations					
SUBJ	ECT:		Ca	arroll's	, LLC		_
		Name of For	eign l	Limited	Liability Comp	oany	
Dear S	Sir or Madam	:					
		avit by Foreign L (s) and fee(s) are				Change Manage	r(s) or
Please	return all cor	respondence cor	cerni	ng this i	natter to the fol	lowing:	
	Na	ancy Alvarez de	l Rea	al			
		Name of Pers	on				
		TBC Corporat	ion				
Firm/Company  4300 TBC Way  Address  Palm Beach Gardens, Florida 33410  City/State and Zip Code						AN A	
		4300 TBC W	av.	. 12.6		Here is a second	-7
E 77		Address	्र इंडिस्ट	o Hi Noi			
	Palm Bea	ach Gardens, F	lorida	3341	0		E STA
		City/State and Zi	р Сос	le			
		nreal@tbccd	orp.cc	m			
Ē	E-mail address	: (to be used for	future	annual	report notificat	ion)	
For fu	rther informa	tion concerning t	his m	atter, pl	ease call:		
ı	Nancy Alvare	ez del Real	at (	561	)	383-3014	
	Name of	Person		Area C	ode and Daytin	ne Telephone Nur	nber
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301				MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations		
	sed is a check	k for the followi \$30 Filing Fe Certificate of Sta	e &	<b>\$</b> 5	5.00 Filing Fee & ied Copy	\$60 Filing Fee Certificate of Stat Certified Copy	

## AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

Department of State is:	Carroll's, LLC
2. This entity was formed under the laws o	f: Georgia
3. This entity was authorized to transact buand its Florida document/registration numb	
4. The name and address of each manager	or managing member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR_	Erik R. Olsen 4300 TBC Way Palm Beach Gardens, Florida 33410
<del></del>	
	TI MAR-
	Y OF STATE EE FLORIDA
Required Signature: Signature of Manager,	Managing Member or Member

Filing Fee: \$25