## 1690000034

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(Address)					
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(City/State/Zip/Phone #)					
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(Document Number)					
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SECRETARY OF STATE
ALLAHASSEE IT DOOR

NOV 0 4 2015 S. YOUNG



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: October 28, 2015

Order#: 840301-007

Re: TRIBRIDGE HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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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.

	ame of the limited liability of			C
2. (a)		EVARD, SUITE 890 of limited liability company: STREET ADDRESS	(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	TAMPA	FL 33609		
	01/26/2009		M	09000000344
3.	Date of filing/regi	stration in Florida	4.	Document number
5. (a)	C T CORPORATION S	YSTEM		
J. (a)	Registered Agent and Registered	<del></del>	f the Florida Dep	t. of State:
	1200 SOUTH PINE ISLA	ND BOAD		
	Registered Office Address (A)	<del></del>	ADDRESS)	<del></del>
	PLANTATION	, F	L_ 33324	SECF
(h)	Corporation Service Com	nany		
(b)	Enter name of NEW Registered	·	ed Office address	Ho M
	1201 Hays Street			그 그 그 !
	NEW Registered Office Address	S:		STATE LORIDA
	Tallahassee	F	L 32301	<del></del>
the ch agent was/w the ar	ange or changes are made, the will be identical. Or, in the vere authorized by an affirmaticles of organization or the value of a member or authorized relative accept the appointment of the appointment o	not organized under the land Florida street address of a Florida limited attive vote of the members operating agreement of the presentative of a member	aws of the Star of the registere liability compa of the limited liabile limited liabile Dona Progress to act in the	riebe, Authorized Person  Printed or typed name of signee  this capacity. I further agree to comply with the
provis the ob to men notifie	sions of all statutes relative t ligations of my position as r rely reflect a change in the r ed in writing of this change.	o ine proper and complet egistered agent as provia egistered office address, .	e perjormance led for in Chaj I hereby confi	e of my duties, and I am familiar with and accep oter 605, F.S. Or, if this document is being filed rm that the limited liability company has been

Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Assistant Vice President