## M12 000006382

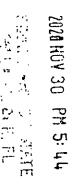
(Re	questor's Name)	<del></del>		
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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: November 24, 2020

Order#: 527575-010

Re: TRUSTILE DOORS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$\$25.00.

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: Meghan Groom

c/o Corporation Service Company

251 Little Falls Drive 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

## 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.

a) .	1780 E 66TH AVE	(b)	1780 E 66TH AVE
<del>-</del> / -	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	DENVER, CO 80229		DENVER, CO 80229
	11/15/2012	M	12000006382
a)	Date of filing/registration in Florida NRAI SERVICES, INC	4.	Document number
(a)	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road	of the Florida D	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2020 NOV 30
	Plantation , F	33324	W 30 F
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company		PH ST TE
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee, F	32301	
ige it w 'we	mited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne registered liability com s of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
<b>S</b> /_	Keith Thompson	Keith	Thompson, Authorized Person
ınat	ure of a member or authorized representative of a member		Printed or typed name of signee
reb isiobli	by accept the appointment as registered agent and a cons of all statutes relative to the proper and complet igations of my position as registered agent as provid thy reflect a change in the registered office address,	gree to act ir ie performan led for in Ch I bereby con	n this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accument is being firm that the limited liability company has been

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

INHS18 (2/14)