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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Date: 12/6/2017	Account#: I2000000088
Name: KENDALL HOWE	<u>LL</u>
Reference #: C02083	30
Entity Name: LTF TRIA	THLON SERIES, LLC
Articles of Incorporation/Aut	thorization to Transact Business
Amendment	
✓ Change of Agent	
Reinstatement	
Conversion	ISSUES - CALL KEN @ 518-213-0738
Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	_
Signature:	\$25.00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: LTF TRIATHLON SERIES, LLC					
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	2902 CORPORATE PLACE		
		(11001-11001-22-04,000-4,100-4,	CHANHASSEN, MN 55317		
	/L\	Mailing address of limited liability company			
	(D)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2802 CORPORATE PLACE		
			CHANHASSEN, MN 55317		
М	av i	23, 2014	M14000003717		
			. Document number		
_	(م)	Danistand Agant and Danistand Office sharm on the	an annual aftha Flavida Dant of State.		
٥.	(a)	Registered Agent and Registered Office shown on the	•		
		Registered Agent:	NRAI Services, Inc.		
		Registered Office Address:	1200 South Pine Island Road		
			Plantation, FL 33324		
	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		NEW Registered Agent:	COGENCY GLOBAL INC.		
		NEW Registered Office Address:	115 North Calhoun St., Suite 4		
		(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301		
and lial the	nfin d the bilit me	imited liability company is not organized under the la ned that after the change or changes are made, the Flor business office of the registered agent will be identify y company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise erating agreement of the limited liability company.	rida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of		
/S	/ Ja	mes Spolar			
Sign	natur	e of a member or authorized representative of a member			
J	amo	es Spolar			
		or typed name of signce			
I I cor and Ch add	nere mply d I d apte ares	by accept the appointment as registered agent and age with the provisions of all statutes relative to the pro- im familiar with and accept the obligations of my pos or 505, F.S. Or, if this document is being filed to men s, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, itjon as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.		
Signature of Registered Agent Coop Honor Appletant Secretary					
~46	Sean Hohan, Assistant Secretary				
	Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00				

INHS18 (12/13)