## M22000000416

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filling Officer.

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2025 FEB -3 AMIN 21

## **COVER LETTER**

	stration Section sion of Corporations					
SUBJECT:	Threat Management Group, LI	.c				
De Bobbe 1.		Name of Limit	ted Liability Company	_		
Dear Sir or M	1adam:					
The enclosed	Registered Agent/Registered	d Office Change	and fee(s) are submitted for filing.			
Please return	all correspondence concerning	ng this matter to	the following:			
David Grantha	аm					
	Name of Person		<del></del>			
Threat Manage	ement Group, LLC					
	Firm/Company		<del></del>			
2075 Thompso	on Ave, Ste 100					
	Address		<del></del>	<u>ن</u> م.	2025	
North Charlest	ton SC 29405			3.4.1. 22.71	2025 FEB	· · · · ·
	City/State and Zip Co	de	<del></del>	THASSEL LOSING	ယ်	i
tmg@threatgro	oup.com			- 19	A	
E-mail a	notification)	327	AM 11: 2	٠.		
For further int	formation concerning this ma	atter, please call	:	ť		
Michael Wise		843 at (	860-8350			
	Name of Person	at (	Area Code & Daytime Telephone Numb	- per		
Regis Divis P.O. 1	ing Address: stration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclo	sed is a check for the follov	ving amount:				
<b>■</b> \$25	5 Filing Fee		\$55 Filing Fee & Certified Copy			

INHS18 (2/14)

## 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. 8	Name of the limited liability company: Threat Manageme	ent Grou	ıp, LLC						
2. (a)	Threat Management Group, LLC				eat Management Group, LLC				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	2075 Thompson Ave. Ste 100		2075 T	Thompson Ave. Ste 100		<del></del> y			
	North Charleston SC 29405	_	North (	Charleston SC 29405					
	2021 Dec 27		M22000	0000416					
3.	Date of filing/registration in Florida	4.		Document number	er				
5. (a	)								
J. ( <b>L</b>	Registered Agent and Registered Office shown on the records of the Jonathan G. Roig	he Florid	la Dept, of	State:					
	Registered Office Address (MUST BE FLORIDA STREET A 2622 Paige Circle	DDRES	<u></u>	<del></del>					
	Panama City FL	32405							
				<del></del>		20:			
(b)						3 55 5			
	Enter name of NEW Registered Agent and/or NEW Registered (	Office ac	<u>ldress</u> :		1.25 25页	. i— 2025 FEB -3			
	Thomas Lanier				95 77				
	NEW Registered Office Address:			<del></del>		AH (			
	236 Marlin Circle				32	AH 11: 2			
	Panama City FL	32408		_		<del></del>			
agent v was/we the arti	imited liability company is not organized under the laws or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liability signed by Michael Susse A0109830000016EC8B44E5000006798	egistere oility co the lim mited l	ed office a impany, in ited liabi iability co	and the business offic t is hereby confirmed lity company or as ot ompany.	ce of the regis	tered			
	ture of a member or authorized representative of a member			Printed or typed name	_				
the obl to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided jely reflect a change in the registered office address, I held in writing of this change.	e to act erforma for in C reby co	in this ca ince of m Thapter 60 infirm tha	ipacity. I further agre y duties, and I am fan 05, F.S. Or, if this do it the limited liability	ee to comply miliar with an ocument is bei company has	with the d accept ng filed heen			
	mas Lanier re of Registered Agent								