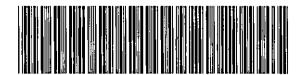
P09000096012

	_			
(Req	(Requestor's Name)			
(Add	ress)			
(Add	(Address)			
(City	/State/Zip/Phone	e #)		
. ,	•	,		
PICK-UP	MAIT	MAIL.		
(Bus	iness Entity Nar	me)		
(Doc	ument Number)			
(==-	-			
Cartified Conies	Cortificator	- of Status		
Certified Copies	Certificates	s of Status		
Special Instructions to F	iling Officer:			

Office Use Only



500301065175

07/17/17--61005--019 ++35.00

S TALLENT JUL 1 9 2017

ELLED BY ST 13

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: TRG Sa	es INC	
50000CT	Name of Corporation	
DOCUMENT NUMBER:	P09000096012	

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas Georgeoff		
Name of Contact Person		
TRG Sales		
Firm/Company		
846 N Cleveland-Massillon Rd		
Address		
Bath Ohio 44333		
City/State and Zip Code		
tgeorgeoff@vehicleinfo.com		
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

Thomas Georgeoff	_{at (} 941)993-9639
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida i organized under the laws of the State of registered agent, or both, in the State of	Florida
1. The name of t	the corporation: TRG Sales, I	NC.	
2. The principal	office address: 1404 59th Av	e E Suite #10 Bradenton, Flo	orida 34203
3. The mailing a Bath Ol	nddress (if different): 846 N Cle hio 44333	eveland-Massillon Rd	
4. Date of incorp	poration/qualification: 12/31/2	009 Document number: P090	00096012
5. The name and		stered agent and registered office on file v	with the
	David Price		_
	444 Acacia Dr		
	Sarasota Florida 34234	<u> </u>	UL T
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered o	FILED JUL 17 PH 5: 13
	John Solomon		_ 透彩 二
	1404 59th Ave E Suite		_
	Bradenton, Florida 342	Box NOT acceptable	_
The street address changed will	ess of its registered office and the be identical.	street address of the business office of	its registered agent.
Such change wa authorized by the	as authorized by <u>resolution duly a</u> be board, or the corporation has b	idopted by its board of directors or by ar seen notified in writing of the change.	n officer so
		3	President
I hereby accept I further agree performance of agent. On it its	to comply with the provisions of a "my duties, and I am familiar with	Printed or typed name and typent and agree to act in this capacity, all statutes relative to the proper and contain and accept the obligation of my position to reflect a change in the registered offstified in writing of this change. 6/12/2017	mplete on as registered
	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
John Solor	non		
	yped or Printed Name	•	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *