

P98 000032493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TCC ASSOCIATES, INC.
Name of Corporation

DOCUMENT NUMBER: P98000032493

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:

M. DANIEL HUGHES, ESQ.

Name of Contact Person

M. DANIEL HUGHES AND ASSOCIATES, P.A.

Firm/Company

3000 NORTH FEDERAL HIGHWAY, SUITE 200

Address

FORT LAUDERDALE, FL 33306

City/State and Zip Code

tccassociates.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TOM CUNDY

Thomas C. Cundy Jr.

at (954)

565-1117

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TCC ASSOCIATES, INC.
2. The principal office address: 2691 East Oakland Park Boulevard, Suite 202
Fort Lauderdale, FL 33306
3. The mailing address (if different): P.O. Box 11975, Fort Lauderdale, FL 33339-1975
4. Date of incorporation/qualification: 04/08/1998 Document number: P98000032493
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

PETER A. PORTLEY, ESQ.

2211 East Sample Road, Suite 204

Lighthouse Point, FL 33064

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

M. DANIEL HUGHES AND ASSOCIATES, P.A.

3000 North Federal Highway, Suite 200

P.O. Box, NOT acceptable

Fort Lauderdale, FL 33306

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.



Signature of an officer or director

THOMAS C. CUNDY, JR., President/Director

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

4/26/22

Date

If signing on behalf of an entity:

M. DANIEL HUGHES

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)