

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009546

Entity Name: TAMPACO L.C.

Current Principal Place of Business:

1001 E ATLANTIC AVE
STE 202
DELRAY BEACH, FL 33483

Current Mailing Address:

1000 MARKET ST
SUITE 300
PORTSMOUTH, NH 03801 US

FEI Number: 02-0602009

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|-------------------------------|
| Title | MGR |
| Name | WALSH, MARK |
| Address | 1001 E ATLANTIC AVE, STE 202 |
| City-State-Zip: | DELRAY BEACH FL 33483 |
| Title | MGR |
| Name | WALSH, WILLIAM |
| Address | 1000 MARKET STREET, SUITE 300 |
| City-State-Zip: | PORTSMOUTH NH 03801 |

| | |
|-----------------|-------------------------------|
| Title | MGR |
| Name | WALSH, MICHAEL |
| Address | 1001 E ATLANTIC AVE, STE 202 |
| City-State-Zip: | DELRAY BEACH FL 33483 |
| Title | MGR |
| Name | ADE, RICHARD |
| Address | 1000 MARKET STREET, SUITE 300 |
| City-State-Zip: | PORTSMOUTH NH 03801 |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD ADE

MANAGER

02/19/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date