## **2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000012453

Entity Name: TF OPCO HOLDING, LLC

**Current Principal Place of Business:** 

90 SOUTH SEVENTH STREET

#3700

MINNEAPOLIS, MN 55402

**Current Mailing Address:** 

90 SOUTH SEVENTH STREET

#3700

MINNEAPOLIS, MN 55402 US

FEI Number: 87-2382359 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD 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

**FILED** Feb 23, 2023

**Secretary of State** 

8985957024CC

Authorized Person(s) Detail:

Title **MANAGER** Title **MANAGER** 

BRASS, JASON Name Name TOMASHEK, ANDREW

Address 90 SOUTH SEVENTH STREET Address 90 SOUTH SEVENTH STREET

> #3700 #3700

MINNEAPOLIS MN 55402 MINNEAPOLIS MN 55402 City-State-Zip: City-State-Zip:

Title **MANAGER** Title **MANAGER** 

CORNELL, CHAD SHAHNAZARIAN, NOEL Name Name

90 SOUTH SEVENTH STREET 90 SOUTH SEVENTH STREET Address Address

#3700 #3700

MINNEAPOLIS MN 55402 City-State-Zip: MINNEAPOLIS MN 55402 City-State-Zip:

Title Title **MANAGER MANAGER** 

FETTERS, TIMOTHY RICHTER, PETER Name Name

90 SOUTH SEVENTH STREET 90 SOUTH SEVENTH STREET Address Address

> #3700 #3700

MINNEAPOLIS MN 55402 MINNEAPOLIS MN 55402 City-State-Zip: City-State-Zip:

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.

02/23/2023 SIGNATURE: JASON BRASS MANAGER