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Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : BERGER SINGERMANN LLP, FT.LAUDERDALE  
Account Number : I20020000154  
Phone : (954) 525-9900  
Fax Number : (954) 523-2872

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
TRIGEANT, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Trigeant, Ltd.  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 5/16/01  
Date of filing/registration in Florida

3. A01000000671  
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Stephen L. Roos

Name

3020 N. Military Trail, Suite 100

Address

Boca Raton, FL 33431

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Daniel Sargeant

Name

3020 N. Military Trail, Suite 100

Florida street address (P.O. Box not acceptable)

Boca Raton FL 33431

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Trigeant, LLC

By:

Signature of General Partner Daniel Sargeant, Manager

*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 obligations of my position as registered agent.*

Signature of Registered Agent - Daniel Sargeant

Filing Fee: **\$35.00**

Certified Copy (optional): **\$52.50**

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