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Division of Corporations

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(((H04000237468 3)))

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : ROSS MATZ INVESTMENTS, INC.

Account Number : I20040000128 Phone

: (954)452-5000

Fax Number

: (954)452-4700

LIMITED PARTNERSHIP AMENDMENT

RM-TRION FEDERAL, LTD.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
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STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

| 1. The name of the limited partnership as identified in the records of the Florida Department of State: RM-Trion Federal, Ltd. |
|--|
| Insert limited partnership's Florida document number: A04000001870 |
| or <u>Attach</u> Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited partnership filing fees. |
| 2. The complete name of the entity after filing Statement of Qualification shall be: |
| RM-Trion Federal, LLLP |
| (Must include LLLP or L.L.P.) |
| 3. The street address of its chief executive office: (if different from current recorded address): |
| 4. The street address of principal office in Florida: |
| 5. The limited parmership hereby elects to be a limited liability limited parmership. |
| 6. The effective date of this filing shall be: x as of the date this document is filed with the Florida Secretary of State or |
| a date later than the time of filing: |
| 7. The name and Florida street address of the partnership's agent for service of process: ROSS REALTY INVESTMENTS, INC. 3328 S. UNIVERSITY DRIVE, SUITE 210 |
| |
| Davie Florida 33328 |
| The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true. Signed this 1st day of December 2004. |
| Signed this 1st day of December , 2004 . |
| Signature of TWO Partners: |
| Typed or printed names of partners signing above: RM-Trion Federal GP, LLC B & D Ross Family, Ltd |

Filing Fee: \$25.00 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75