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(Business Entity Name)

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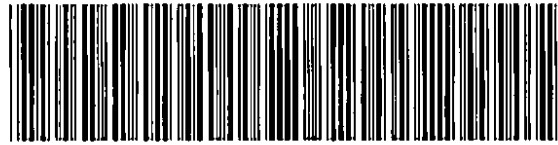
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**COGENCYGLOBAL<sup>®</sup>**

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 10/12/2023

Name: Jennifer

Reference #: 2121526

Entity Name: TRIVEST FUND IV-A, L.P.

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: 35.00

Signature: 

• CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40TH ST, 10TH FL  
NY, NY 10016  
D: +1.212.947.7200  
P: 800.221.0102  
F: 800.944.6607

• EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES,  
REGISTRY #010712  
6 LLOYDS AVE, UNIT 4CL  
LONDON EC3N 3AX  
+44 (0)20.3961.3080

• ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
UNIT B, 6/F, LIPPO LEIGHTON TOWER  
103 LEIGHTON RD, CAUSEWAY BAY  
HONG KONG  
P: +852.2682.9633  
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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. TRIVEST FUND IV-A, L.P.  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 6/21/2007 3. B07000000197  
Date of filing/registration in Florida 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:

Corporation Service Company  
Name

1201 Hays Street  
Address

Tallahassee, FL 32301-2525  
City, State and Zip

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

COGENCY GLOBAL INC.  
Name

115 North Calhoun St., Suite 4  
Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301  
City, State and Zip

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

/s/ David Gershman, Manager of TRIVEST PARTNERS GP, LLC, General Partner  
Signature of General Partner

*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.*

/s/ Tim Mayville  
Signature of Registered Agent

**Filing Fee: \$35.00**  
**Certified Copy (optional): \$52.50**