2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000002549

Entity Name: TRIVANTIS CORPORATION

FILED Oct 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	REAL, STE 3' ON, FL 33432				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
311 ELM ST SUITE 200 CINCINNAT	TREET TI, OH 45202				
FEI Number:	31-1667388	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US					
The above in the State		ubmits this statement for the pur	pose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: JAMES HALPIN					
	Electroni	ic Signature of Registered Agent		Date	
		(2)(b), F.S., the corporation did not r	eceive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PC () BEECH, CHARL 5100 POPLAR S MEMPHIS, TN 3	ST. SUITE 3112	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () LOUDERMILK, ¹ 311 ELM ST, ST CINCINNATI, OH	E 200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPF () HORD, CHRISTO 311 ELM ST, ST CINCINNATI, OF	E 200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CSAD () LOUDERMILK, 7 311 ELM ST, ST CINCINNATI, OH	E 200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ROBINSON, MIC 40 S MAIN MEMPHIS, TN 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ROEDING, RICH PO BOX 625737 CINCINNATI, OH	7	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER W. HORD VPF 10/13/2009