

F10000000000239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

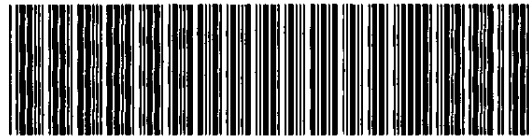
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
10 NOV - 8 PM 3: 29

RA/RD/CHG
@ 11/8/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Triarch Marketing, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F1000000239

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Linda Stauffer
(Name of Contact Person)

NRAI Corporate Services
(Firm/Company)

16055 Space Center Blvd., Suite 235
(Address)

Houston, Texas 77062
(City/State and Zip Code)

For further information concerning this matter, please call:

Linda Stauffer at (800) 862-5438
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2010

DENISE BELL
NRAI CORPORATE SERVICES
16055 SPACE CENTER BLVD., STE. 235
HOUSTON, TX 77062

SUBJECT: TRIARCH MARKETING, INC.
Ref. Number: F1000000239

We have received your document for TRIARCH MARKETING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 410A00025402

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10 NOV - 8 AM 10:29
TALLAHASSEE FLORIDA
SECRETARY OF STATE

*Revised form attached.
Thanks,
Linda Joepfel
(800) 862-5438*

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Louisiana in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Triarch Marketing, Inc.
2. The principal office address: 508 SPENCER STREET, RAYVILLE LA 71269
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/14/2010 Document number: F10000000239
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Incorp Services, Inc.
17888 67th Court North
Loxahatchee, FL 33470

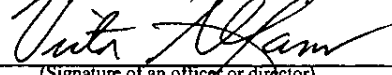
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.
2731 Executive Park Drive, Suite 4
(P.O. Box NOT acceptable)
Weston, FL 33331

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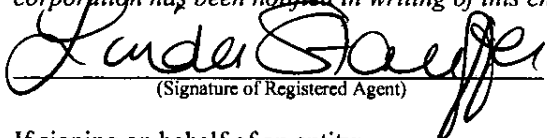
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Victor Alfano, Vice President
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

11-1-10
(Date)

If signing on behalf of an entity:

Linda Stauffer
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***