L05000036708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

900249409849

07/03/13--01014--022 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUL -3 AM 11:01

JUL 5 2013

T. HAMPTON

WALTERS
LEVINE
KLINGENSMITH
& THOMISON
ATTORNEYS AT LAW
CHICAGO • SARASOTA • TAMPA

ALAN F. GONZALEZ, LL.M.
agonzalez@walterslevine.com
www.walterslevine.com

601 BAYSHORE BOULEVARD
SUITE 720
TAMPA, FLORIDA 33606
(813) 254-7474
(813) 254-7341 FAX

June 28, 2013

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Trinity Materials, LLC
Our File No. 1587-5

Gentlemen:

Enclosed is this firm's Check No. 6439 in the amount of twenty-five (25) dollars in payment of the fee for filing the Statement of Change of Registered Office or Registered Agent or Both for LLLC.

Thank you for your assistance.

Very truly yours,

WALTERS LEVINE KLINGENSMITH
& THOMISON, P.A.

Alan F. Gonzalez, LL.M., Esquire

AFG/act
Enclosures: Check No. 6439

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: TRINITY MATERIALS, LLC

2. (a) Principal office address of limited liability company: 6520 S. PARK CIRCLE
(*Note: MUST BE STREET ADDRESS*) SUITE 320
ORLANDO, FL 32819

(b) Mailing address of limited liability company: 6520 S. PARK CIRCLE
(Note: MAY BE POST OFFICE BOX) SUITE 320
ORLANDO FL 32819

4/14/2005 — 3. Date of filing/registration in Florida

L05000036708 — 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: WALTERS LEVINE KLINGENSMITH & THOMISON LLC

Registered Office Address: 1619 MAIN STREET
SUITE 1110
SARASOTA, FL 34236

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: WALTERS LEVINE KLINGENSMITH & THOMISON P.A.

NEW Registered Office Address: 601 BAYSHORE BOULEVARD
(MUST BE FLORIDA STREET ADDRESS) SUITE 720
TAMPA FL 33606

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

MARTIN FALLON, MANAGER
Printed or typed name of signee

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent, STUART JAY LEVINE, ESQ.

FILED
13 JUL -3 AM 11:01
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: $25.00

INHS18 (05/08)