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ASSEE FLORIDA

T. CLINE

AUG 24 2009

EXAMINER



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: TRIVIC MANAGEMENT GROUP, LLC Name of Corporation		
DOCUMENT NUMBER: LO6000056602		
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:		
Name of Contact Person		
NBI UVICANUS Firm/Company		
3300 5 Higwasser Road Ste 107		
Orlando PL 32835 City/State and Zip Code	ZODO AUG	n Seriasi i y
E-mail address: (to be used for future annual report notification)	2009 AUG 21 PH I2: 54 SEGRETARY OF STATE FALLAHASSEE, FLORID	inches (
For further information concerning this matter, please call:	2: 54 TATE ORIDA	.,,
LISA Bakev at (407) 291-115 Name of Contact Person Area Code & Daytime Telephone		
Name of Contact Person Area Code & Daytime Telephone	• Number	
D. J. J. Mac O. J. al. words were blacks the Department of State		

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

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.

in the state of Piortaa.		
1. Name of the limited liability company: TRIVIC MANA	AGEMENT GROUP, LLC	
 (a) Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>) 	v: 5051 TILDENS GROVE BOULEVARD WINDERMERE FL 34786 US	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	C/O A.G.C. CO. 200 SOUTH ORANGE AVENUE, STE. 2300 ORLANDO FL 32801 US	
6/1/2006	L06000056602	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	A.G.C. CO.	
Registered Office Address:	200 S. ORANGE AVE. SUN TRUST CENTER SUITE 2300 ORLANDO FL 32801 US	
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:	
NEW Registered Agent:	NEW BEVERAGE INSIGHTS TUTCEWORKS LLLP	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3300 S Hrawasser Road Stelon	
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chareby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member) (Printed or typed name of signee)	et address of the registered office and the business hase of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prain familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability complany has been notified by: (Signature of Registered Agent)	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		

INHS18 (05/08)