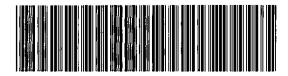
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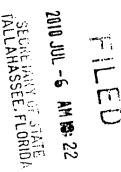
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C. LEWIS
7 2010
EXAMINER

COVER LETTER

*TO: Registration Section Division of Corporations

SUBJEC	ECT:TRITON V, LLC		
	Name of Limited Liability Company		
Dear Sir	or Madam:		
The enclo	osed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.	
Please ret	turn all correspondence concerning	this matter to the following:	
	KRISHNA W. LAWRENCE	<u> </u>	
	TRITON V, LLC Firm/Company		
	3389 SHERIDAN STREET, #5	558	
	HOLLYWOOD, FLORIDA 330 City/State and Zip Code	021	
E-mai	ASMITH@FIVEPOINTSCORP. I address: (to be used for future annual report n	COM notification)	
For furthe	er information concerning this matt	er, please call:	
K	RISHNA W. LAWRENCE Name of Person	at (954) 625-2929 Area Code & Daytime Telephone Number	
Re Di Cl 26	TREET/COURIER ADDRESS: egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Eı	nclosed is a check for the followin	ng amount:	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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. TRITON V. LLC 1. Name of the limited liability company: ____ 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5440 S. STATE RD 7 HOLLYWOOD, FLORIDA 33314 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 3389 SHERIDAN STREET, #558 HOLLYWOOD, FLORIDA 33021 4/2/2007 L07000035154 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: AUDREY SMITH, ESQ Registered Office Address: 5440 S. STATE RD 7 HOLLYWOOD, FLORIDA (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**: **NEW** Registered Agent: KRISHNA W. LAWRENCE **NEW** Registered Office Address: 5440 S. STATE RD 7 (MUST BE FLORIDA STREET ADDRESS) HOLLYWOOD, FLORIDA 33314 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 KRISHNA W. LAWRENCE 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