L08000109864

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SECRETARY DE STATE
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COVER LETTER

TO:	Registration S Division of Co			
SUBJI	ECT:	TRIEX HU	NGARY CRO LLC	
5020			ited Liability Company	
The en	closed Articles o	f Amendment and fee(s) are sul	omitted for filing.	
Please	return all corresp	condence concerning this matter	to the following:	
			NORBERT AGH	
			Name of Person	,
		TRIE	EX HUNGARY CRO LLO	
			Firm/Company	
		7601 N.	FEDERAL HWY SUITE	A275
			Address	
		BC	OCA RATON, FL 33487	
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		no	rbertagh@hotmail.com	
For fur	ther information		to be used for future annual report	notification)
1 Of Tur	mei miormation	concerning this matter, please of	zan.	
		ORBERT AGH	at (_561)	459 4747
	Name	of Person	Area Code & Day	ytime Telephone Number
Enclos	ed is a check for	the following amount:		
\$25	5.00 Filing Fee	✓ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee, Certificate of Status & OSECTORY CERTIFIED COPY (additional copy is enclosed)
	Regis Divis P.O. 1	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	Registration Se Division of Co Clifton Buildin	rporations ng e Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 SEP 22 PM 28

TRIEX HUNGARY CRO LLC SECRETARY OF STATE (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on12/01/2008 and assigned Florida document numberL08000109864	
This amendment is submitted to amend the following:	
A) If amending name, enter the new name of the limited liability company here:	
TRIEX CRO LLC	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviati "L.L.C."	ion
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	_
	-
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	_
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	- <u>ew</u>
Name of New Registered Agent:	_
New Registered Office Address: Enter Florida street address	-
Anno. 1 for the on con want cos	
, Florida, Zip Code	-
New Registered Agent's Signature, if changing Registered Agent:	

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u> </u>	Name	Address	Type of Action
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_			Remove
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Filing Fee: \$25.00