## -LUUUUDG 7181

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500187610515

B. KOHR DEC 27 2010

EXAMINER



PORATION SERVICE COMPANY.

ACCOUNT NO. : I2000000195

REFERENCE : 624055

7705594

AUTHORIZATION :

COST LIMIT

ORDER DATE: December 27, 2010

ORDER TIME: 11:43 AM

ORDER NO. : 624055-005

CUSTOMER NO: 7705594

## CHANGE OF AGENT

NAME:

TRIDENT DEVELOPMENT

ENTERPRISE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER:

## 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: Trident Dev	elopment Enterprise, LLC.
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	Suite 350 Orlando, FL 32811
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4901 Vineland Road Suite 350 Orlando, FL 32811
June 24, 2010	L10000067181
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:	Schrank, Edward
Registered Office Address:	509 Majestic Oak Drive Apopka, FL 32712
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEY NEW</u> Registered Agent:	W Registered Office address:  Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street  Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the capture of the confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member or authorized representative of a member)	t address of the registered office and the business
Signature of a member of authorized representative of a member)	
Irvin E. Richter (Printed or typed name of signee)	_
Thereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prought 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 company has been notified Lorporation Service Company	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signapore of Kigistered Agent)  Jacqueline N. Casper, As	sistant VP
Division of Corporations, P.O. Box	• •

FILING FEE: \$25.00