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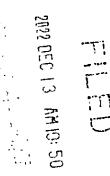
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	TRINITY PETRO D LLC		
	Name	e of Limited Li	ability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning this	matter to the f	ollowing:
Christo	opher Gonzalez		
	Name of Person		_
Paracoi	ep Incorporated		
	Firm/Company		
2804 G	iateway Oaks Drive #100		_
	Address		
Sacram	iento, CA 95833		
	City/State and Zip Code		
E	-mail address: (to be used for future annu	al report notifi	cation)
For fur	ther information concerning this matter, p	lease call:	
Christo	pher Gonzalez	888 at (272-3725
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following a	mount:	
	■ \$25 Filing Fee	□ \$5	5 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 605.0114 or 605.0116. 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.

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