

MD3000002651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

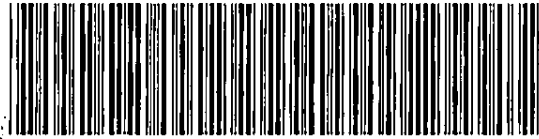
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**DATE: 2/5/19**

**NAME: MORRIS FLORIDA LLC**

**TYPE OF FILING: AMENDMENT**

**COST: 55.00**

**RETURN: CERTIFIED COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*A Hodge*

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2019 FEB -5 A M: 5:2  
TALLAHASSEE, FL

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Morris Florida LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Owen Doherty, Paralegal  
Name of Person

Hinckley Allen & Snyder LLP  
Firm/Company

28 State Street  
Address

Boston, MA 02109  
City/State and Zip Code

odoherty@hinckleyallen.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Owen Doherty at ( 617 ) 378-4374  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of  
State: Morris Florida LLC

Enter new principal office 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)**

2. The Florida document number of this limited liability company is: M03000002651

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: August 8, 2003

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Trident Southeast, LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, Florida \_\_\_\_\_

City

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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the liability company has been notified in writing of this change.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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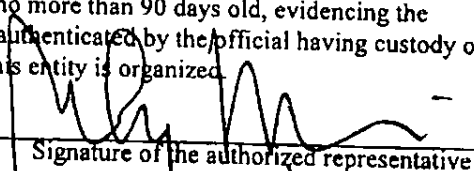
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

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<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Morris Group, Inc.</u>	<u>910 Day Hill Road, Windsor, CT 06095</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>John Bowen</u>	<u>14 Garden Gate, Farmington, CT 06032</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Gene Haas</u>	<u>2800 Sturgis Road, Oxnard, CA 93030</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Scott J. Myre</u>	<u>5919 Bowen Daniel Drive, Unit #102, Tampa, FL 33616</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Bradley R. Morris</u>	<u>910 Day Hill Road, Windsor, CT 06095</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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 TALLAHASSEE COUNTY FLORIDA  
 CLERK OF CIRCUIT COURT

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
 \_\_\_\_\_  
 Signature of the authorized representative  
 Bradley R. Morris, President of Morris Group, Inc., its Manager  
 \_\_\_\_\_  
 Typed or printed name of signee

Filing Fee: \$25.00

# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "MORRIS FLORIDA LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "TRIDENT SOUTHEAST, LLC" ON THE THIRTIETH DAY OF JANUARY, A.D. 2019, AT 4:31 O`CLOCK P.M.

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Jeffrey W. Bullock, Secretary of State

3654621 8320  
SR# 20190734241

Authentication: 202202057  
Date: 02-05-19

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)