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COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: TRC NOVA, LLC (Name of Foreign Limited Liability Company) Dear Sir or Madam: The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: CATHERINE GREER (Name of Person) TWIN RIVERS CAPITAL, LLC (Firm/Company) 57 HASELL STREET (Address) CHARLESTON, SC 29401 (City/State and Zip Code) For further information concerning this matter, please call: CATHERINE GREER at (843) 722-9925 (Name of Person) (Area Code and Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$30 Filing Fee & \$25 Filing Fee □ \$55.00 Filing Fee & \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

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Certified Copy

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the limited liability compan Department of State is: TRC NOVA, LLC	y as it appears on the records of the Florida
2. This entity was formed under the laws of	SOUTH CAROLINA.
3. This entity was authorized to transact bus and its Florida document/registration number	siness in Florida on <u>SEPTEMBER 18, 20</u> 07 or is <u>M07000005635</u> .
4. The name and address of each manager of	or managing member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM_	TRC MANAGEMENT, LLC 57 HASELL STREET CHARLESTON, SC 29401
	AM 10: 46
Required Signature: (Signature of Manager, I BY: JEFFREY)J. LAMBERSON, A	Managing Member or Member) MEMBER OF TRC MANAGEMENT, LLC

Filing Fee: \$25