

MIS000004135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

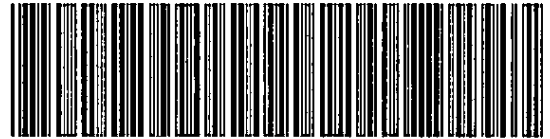
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2022 FEB 28 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FL

COVER LETTER

RECEIVED

TO: Registration Section  
Division of Corporations

2022 FEB -3 AM 7:38

SUBJECT: Trident Funding, LLC

Name of Limited Liability Company

SECRETARY OF STATE  
TALLAHASSEE, FL

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fcc(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anita Jairam

Name of Person

McGlinchey Stafford

Firm/Company

One East Broward Blvd. Suite 1400

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

ajairam@mcglinchey.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anita Jairam

Name of Person

at ( 954 ) 356-2454

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 amount:

☒ \$25 Filing Fee

☐ \$55 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.*

1. Name of the limited liability company: Trident Funding, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

1077 Bridgeport Ave.

1077 Bridgeport Ave.

Shelton, CT 06484

Shelton, CT 06484

3. 04/30/2018 4. M18000004135  
Date of filing/registration in Florida Document number

5. (a) Cogency Global Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

115 North Calhoun, Ste 4

Tallahassee, FL 32301

(b) CSC - Corporation Service Company  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

FILED  
2022 FEB 28 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Mark E. Breedan  
Signature of a member or authorized representative of a member

Mark Breedan  
Printed or typed name of signee

*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 limited liability company has been notified in writing of this change.*

Jennifer M. Weeks Asst. VP  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00