P09000032275

(Re	equestor's Name)	
()-	4	
(Ad	Idress)	
(Address)		
(Cit	ty/State/Zip/Phone	· #)
/	—	
☐ PICK-UP	WAIT	MAIL
,		
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
O-4:5:- d O::	0-4:6:	- f Ob-b
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
		}

Office Use Only



500155928065

05/26/09--01011--029 **35.00

2009 MAY 26 AM IO: 39
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

2009 MAY 26 AM 10: 3

R.A. 5/28/09

COVER LETTER

TO: Amendment Sec Division of Corp	ction porations		
SUBJECT: Trini	ity Resource Services Inc. Name of Corporation		
DOCUMENT NUMBE	R: P09000032275		
The enclosed Statement	of Change of Registered Office/Agent and fee are subm	itted for filing.	
Please return all correspo	ondence concerning this matter to the following:		
	Carmen N. O (meda Name of Contact Person		
·			
	Firm/Company		
	7010 Autumnvale Dr. Address		
	Address		
	Orlando FL 32822 City/State and Zip Code		
	•		
cucaolmeda 6 hotmail. com			
	ail address: (to be used for future annual report not	ification)	
	concerning this matter, please call:		
Carnes Name of	Contact Person at (407) Area Code & Days	49 ~ 5817 time Telephone Number	
Enclosed is a \$35.00 che	eck made payable to the Department of State.		
	Mailing Address:Street AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildTallahassee, FL 323142661 ExecutionTallahassee, ITallahassee, I	Section Corporations ing ve Center Circle	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Lorida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Trinity Resource Services inc.
1. The name of the corporation: Trinity Resource Services, Iuc. 2. The principal office address: 7010 Quitum n vale Drive Or lando FL 32822
3. The mailing address (if different):above
4. Date of incorporation/qualification: April 8, 2007 Document number: P090000 32275
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Jose W. Arroyo-Ramírez
5421 Hisgins Way
Jose W. Arroyo-Ramírez 5421 Higgins Way Orlando FL, 32808 TOTAL
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
7010 Autumnuale Drive P.O. Box NOT acceptable
Orlando FL 32822
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Hector L. Arroyo, Vice President
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
James n. denede 5-21-2009
Signature of Registered Agent Date
If signing on behalf of an entity:
Carnen N. Olmeda Typed or Printed Name

* * * FILING FEE: \$35.00 * * *