P09000037802

| (Requestor's Name) |
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| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| · |
| (Business Entity Name) |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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09 AUG 20 AM [1: 28 SECRETARY OF STATE TALL AHASSEE, FLORIE

LA Chark C.COULLIETTE

AUG 24 2009

EXAMINER

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|--|------------------------------|-----------------------------------|---------------------|--|
| SUBJECT: | Tripod Holding Name of Corpo | Corp | | |
| | Name of Corpo | ration | | |
| DOCUMENT NUMBER: | P09000 | 037802 | | |
| The enclosed Statement of Change | c of Registered Office/Ag | ent and fee are submit | ted for filing. | |
| Please return all correspondence c | concerning this matter to t | he following: | | |
| | | | | |
| | Kathryn O'B | Brien | | |
| | Name of Contact | Person | | |
| | | | | |
| | Tripod Holding | | | |
| | Firm/Compa | iny | | |
| | | | | |
| 1450 S Dixie Hwy Ste 200 | | | | |
| | Address | | | |
| | | | | |
| <u></u> | Boca Raton, FL | 33432 | · | |
| | City/State and Zi | p Code | | |
| | kate@remingtoncapi | talcorp.com | | |
| | ss: (to be used for future | | cation) | |
| | | | | |
| For further information concerning | g this matter, please call: | | | |
| Kathryn O'B | rien a | (954) | 557-3088 | |
| Name of Contact F | | | ne Telephone Number | |
| Enclosed is a \$35.00 check made | pavable to the Departmen | t of State | | |
| | | | | |
| Mailing A | Address: | Street Address: | | |
| Amendm | ent Section | Amendment Se | | |
| | of Corporations | Division of Cor | • | |
| P.O. Box | see, FL 32314 | Clifton Buildin 2661 Executive | _ | |
| ं व व व व व व व व व व व व व व व व व व व | 500, FL 32314 | Tallahassee, FL | | |

TO:

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the corporation: Tripod Holding Corp |
| 2. The principal office address: 1450 S Dixie Hwy Ste 200 |
| Boca Raton, Fl. 33432 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 04/28/2009 Document number: P09000037802 |
| 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) |
| Remington Capital Corp |
| 1489 West Palmetto Park Road Suite 425 |
| Boca Raton, FL. 33486 6. The name and street address of the new registered agent (if changed) and /or registered office SOC 20 |
| (if all an early) |
| Reminaton Capital Corp |
| 1450 S Dixie Hwy Suite 20 P.O. Box NOT acceptable |
| Boca Raton, Fl. 33432 |
| 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. |
| Kathryn O'Brien, Secretary/Treasurer Signature of an officer or director Kathryn O'Brien, Secretary/Treasurer Printed or typed name and title |
| 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. |
| 08/14/2009 |
| If signing on behalf of an entity: |

Kathryn OBrien-Remington Capital Corp

Typed or Printed Name

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