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TRIDENT HOLDINGS GROUP, INC.

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Trident Holding (o
DOCUMENT NUMBER: \$1309Z
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person  Trident Holding Govo Inc.  Firm/Company  371 E Street  Address  Chilo Viota CA 91910  City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Fernando Carrillo at (619) 422-1348  Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** 

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

## 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 Statytes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.  in order to change its registered affice or registered agent, or both, in the State of Florida.
1. The name of the corporation: Trident Holding Grove Inc.
2. The principal office address: 371 E Street  Chula Viata (H 91910
3. The mailing address (if different):
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)
NRAI Services, Inc
1200 5 Pine Island Rd
Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
GKL Registered Agents, Inc.
28089 Vanderbilt Dr. Suite 201
P.O. Box NOT acceptable
Bonita Springs, FL 34134
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.
Significant of Officer or director Frinted or typed name and title
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 auties, and I gan 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.
Samuel Kiloh
f signing on behalf of an entity:
Sarina Lish Typod or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)