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EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Palm Beach Pru Services (U/P. Name of Corporation
DOCUMENT NUMBER: P 0 8 0000 9 6 7 5 4
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:
MARILDAVID ZUMMO-HU/ley Name of Contact Person
Palm Beach Pro Services Cong. Firm/Company
65/W. O'Heechobee Blvl #302 Address
West Palm Black, FL 33401 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Macuon = 3/44-1- 2/3 - 2/30-(a) 39
MARILDAVID Blumm - Hurle at (813) 230-6239 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

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 Flurida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Palm Beach Pro Services Conp.
2. The principal office address: 651 W. Olkee the bed Blvcl #302
West Palm Beach, Fr 33401
3. The mailing address (if different): Suml as as us. (5) W. Okee chrose Blud, West Palm Beach FC, 33401
(05/ W. Obee chasee Blud, West Palm Beach Fe, 33401
4. Date of incorporation/qualification: 10/27/08 Document number: POBOO 00 96 754
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)
Nose S. Ramis
Jose S. Ramus 4420 Inl Ane N.
St. Peters burg, to 33713. To = 1
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed): New Address: 651 W. Olkeechon see Bl
#302. West PalmBeach
P.O. Box NOT acceptable FL, 33401
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.
Maile Javi D Jumm - Hurle Signature of an officer or director Printed or type of fame 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.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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