# 00005257

## Florida Department of State

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# REGISTERED AGENT CHANGE

### PROFESSIONAL PLANNERS MARKETING GROUP, LLC

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850-617-8381 12/21/2007 9:38 PAGE 001/001 Florida Dept Or State



December 21, 2007

FLORIDA DEPARTMENT OF STATE

PROPESSIONAL PLANNERS MARKETING GROUP, LUC PORNIGONS PO BOX 14457

NORTH PAIM BEACH, PL 33408-0457

SUBJECT: PROFESSIONAL FLAMMERS MARKETING GROUP, LLC

REF: L00000005257

We received your electronically transmitted document. However, the document has not been filled. Please make the following corrections and refax the complete document, including the electronic filling cover sheet.

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Tammy Hampton Regulatory Specialist II Registration/Qualification Section

FAX Aud. #: H07000303669 Latter Number: 107200071150

P.O BOX 6327 - Tallahassec, Florida 32314

### STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisio liability company submit agent, or both, in the Stat	ns of sections 608,4) s the following statum e of Florida.	6 or 608.50 cent in order	8, Flor to cha	rida Statute. unge its regi	s, the undersigned limit stered office or register	ted red
1. The name of the limite						
2. The mailing address of	• •					
North Palm Beach, FL 33408		· • — • · · · · · · · · · · · · · · · ·				
N.F 0. 0000			× 000	00005257		
May 8, 2000  3. Date of filing/registrat	ion in Florida	nber	—			
5. The name of the registr	red agent and the reg	istered office				
Florida Department of	State: <u>Steven J. San</u>	dhara				
	STATES OF SEL	Name				9
	636 U.S. Hwy One, Suite	205			. 97	DIVISION
Address				DEC	Ö	
	North Palm Beach, FL 33	, State and Z	7		. 8	Q.
e en	-	•	-		•	S
6. The name and address	of the new registered	egent and/or	ornce:		<b>*</b>	RPC
		orporation Syst	iem		ċċ	Ä
		Name			·	OF CORPORATIONS
		th Pine Island B				ŝ
	Florida street addre	ss (P.U. Box	NOT	acceptable)		
•	Plantation	FL		33324		
	City,	State and Zij	P			
If the limited liability conconfirmed that after the cland the business office of liability company, it is he of the members of the lim or the operating agreement (Signature of a member or suttor Dr. A. Peter (Printed or typed more of aignet)	the registered agent y reby confirmed that the ited liability company t of the limited liability liad representative of a mem	made, the Flovill be identi- te change(s) y or as other ty company.	orida st cal. Or was/we wise m	reet address;, in the case one authorize	of the registered office of a Florida limited d by an affirmative you	2
I hereby accept the appoint comply with the provision and I am jamiliar with an Chapter 108, F.S. Or if address, I hereby confirm Conf		nniner Pavo Int-Secreta	LÀ. Dù	•		to s, 1
INHS18 (8/05)		NG FEE: S2	-	•	•	

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