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EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
	MENTAL ASSESSMENTS, LLC d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this n	Change and fee(s) are submitted for filing.  natter to the following:
Laura Vedral Name of Person	
Name of Person	
Precision Environmental Assessments, I	<u>LC</u>
302 Mohawk Road, Suite B	
Clermont, Florida 34715 City/State and Zip Code	· 
Laura@PrecisionEnviro.com E-mail address: (to be used for future annual report notificat	ion)
For further information concerning this matter, ple	ease call:
Laura Vedral at (at (at (	
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Precision	Environmental Assessments, LLC
2. (a) Principal office address of limited liability company	y: 302 Mohawk Road, Suite B
(Note: MUST BE STREET ADDRESS)	Clermont, Florida 34715
(b) Mailing address of limited liability company:	302 Mohawk Road, Suite B
(Note: MAY BE POST OFFICE BOX)	Clermont, Florida 34715
10/26/2006	L06000105178
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	- 22 - 22
Registered Agent:	Laura A Vedral
Registered Office Address:	1107 Chelsea Parc Drive Minneola, Florida 34715
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	W Registered Office address:  302 Mohawk Road
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Suite B
	Clermont ,FL34715
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	lorida street address of the registered office
Laura A Vedral Printed or typed name of signee	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proud and I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, thereby confirm that the limited liability company	igree to act in this capacity. I further agree to oper and complete performance of my duties, stition as registered agent as provided for in crely reflect a change in the registered office y has been notified in writing of this change.
Signature of Registered Agent	