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PICK-UP	L	WAIT	Ш	MAIL	
(Business Entity Name)					
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(Document Number)					
Certified Copies		Certificate	s of Status	·	

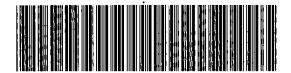
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L. SELLERS

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TO: Registration Section
Division of Corporations

SUBJECT: PALM BEACH PROFESSIONALS, LLC
Name of Limited 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 matter to the following:

Lyne E. Spozarsky
Name of Person

Clo Robert G. Gordon
Firm/Company

223 Sunset Avenue #/20
Address

Palm Beach, FL 33480

City/State and Zip Code

ARLETTE 6-334 @ aol-Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lynne E. SPozarsky at (561) 833-4000

Name of Person at (561) 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 amount:

\$25 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR JOHN 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: PALM BEI	ACH PROFESSIONALS, LLC
2. (a) Principal office address of limited liability company	;
(Note: MUST BE STREET ADDRESS)	223 SUNSET AVENUE *120 Palm Beach, FL 33480
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	PALM BEACH FL 33450
05/02/2007 3. Date of filing/registration in Florida	L07000046604
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Lee B. Gordon, Esq.
Registered Office Address:	•
	101 BRADLEY PLACE SUTE 211 PALM BEACH, FL 33480
(b) Enter name of NEW Registered Agent and/or NEW	
NEW Registered Agent:	LYNNE E. SPOZARSKY
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	LYNNE E. SPOZARSKY C/O Robert G. GORDON 223 SUNSET AVENUE #120 PALM DEACH ,FL 33450
If the limited liability company is not organized under the loonfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the potating agreement of the limited liability company	orida street address of the registered office
Signature of a member or authorized representative of a member	85 W -
Printed or typed name of signee	
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proand I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby can firm that the limited liability company	gree to act in this capacies for the agree to sper and complete perfortative of my duties, sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Figent	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00