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(Requestor's Name)		
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(City/State/Zip/Phone #)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
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EXAMINER



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SECRETARY OF STANK

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Professionals Providing Proper Pro Planning Producing Postive Performance 1/2  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:  (10 Change Agents to my Self - Richard Ross
Richard Ross Name of Person
Name of Person
Professionals Providing Proper Preplanning Producing Postike Petermance Il
757 Musa Dr. Address
Key Largo FL 33037 City/State and Zip Code
Richard - Rost C big Foot. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard Ross at (305) 890 6842  Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations 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 **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.

agent, or both, in the blace of 1 tortaa.	
1. Name of the limited liability company: Professionals Pro	oviding Proper Preplanning Producing Rostive Perfor Anu
2. (a) Principal office address of limited liability company	y:
(Note: MUST BE STREET ADDRESS)	757 Musa Drive Key Logo FL 33037
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	99611 015 Hurs, #147 Key Lugo FL & 33037
3/26/05	L08000031077
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporation Service Company
Registered Office Address:	1201 Hoys Street ST
	10 10 A 2 PC 3 C 30 S
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEV</b>	W Registered Office address:
NEW Registered Agent:	Richard Ross 3 395
NEW Registered Office Address:	757 Musa Drike is Es
(MUST BE FLORIDA STREET ADDRESS)	
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 ident liability 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	Florida street address of the registered office
Richard Ross 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 prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compand	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.

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