

MD5 000003858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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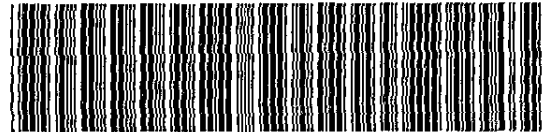
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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58

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Premier Professional Services, LLC  
(Name of Corporation)

**DOCUMENT NUMBER:** M05000003858

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:

Cory Gelmon  
(Name of Contact Person)

Brittania Law Office  
(Firm/Company)

505 Elbow Drive SW, Suite 270  
(Address)

Calgary, AB Canada T2S 2T6  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cory Gelmon at ( 800 ) 808-0899  
(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

**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. The name of the limited liability company is: Premier Professional Services, LLC
2. The mailing address of the limited liability company is: 7200 W. Camino Real, Suite 300  
Boca Raton, Florida 33433

7-7-05

M05000003858

3. Date of filing/registration in Florida
4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Ronald N. Rosewasser

Name

Friedman, Rosenwasser & Goldbaum

Address

5355 Town Center Rd., Ste. 801, Boca Raton, FL 33486

City, State and Zip

6. The name and address of the new registered agent and/or office:

CT Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation

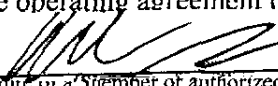
FL

33324

City, State and Zip

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**TALLAHASSEE, FLORIDA**

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
(Signature of a member or authorized representative of a member)

Brad Goldstein, President

(Printed or typed name 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
(Signature of Registered Agent)

If signing on behalf of an entity:

CT Corporation Systems

(Typed or Printed Name)