

N98000002670

(Requestor's Name)

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4 RA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NATIONAL BUDGET PLANNERS
(Name of Corporation)

DOCUMENT NUMBER: N98 00000 2670

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:

DAVID MUELLENKOFF
(Name of Contact Person)

ATTORNEY AT LAW
(Firm/Company)

2150 PORTOLA AVE. # D-113
(Address)

LIVERMORE CA 94551
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID MUELLENKOFF at (925) 577-1534
(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 CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NATIONAL BUDGET PLANNERS OF SOUTH FLORIDA, INC.
2. The principal office address: 1000 EAST ATLANTIC BLVD., SUITE 205 H
POMPANO BEACH FL 33060
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/11/1998 Document number: N 98 000002670
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

SANDSTROM, LUCY
1000 EAST ATLANTIC BLVD SUITE 205 H
POMPANO BEACH FL 33080

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
(P.O. Box NOT acceptable)
PLANTATION FL 33324

CLERK OF STATE
TALLAHASSEE, FLORIDA

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The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

SCOTT J. SANDSTROM
(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 obligation of my position as registered agent. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

5/2/06
(Date)

If signing on behalf of an entity:

Jennifer Quinn
Assistant Secretary
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CRZE045 (8/03)