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(Requ	uestor's Name)		
(Addi	ress)			
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(City/	State/Zip/Phor	ne #)		
PICK-UP			MAIL	
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Certified Copies	Certificate	es of S	Status	
Special Instructions to Fi	ling Officer:		.	

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SECRETARY OF STATE ORID.

R.A. Change

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: A Home & BUILDING INSPECTION OF JUPITER FUC. (Name of Corporation)
DOCUMENT NUMBER: 65-1058020
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:
Chais Aumade (Name of Contact Person)
. (Commercial Commercial Commerci
A Home & BULDING INSPECTION OF JUPITER INC: (Firm/Company)
15 YACHT CLUB PLACE (Address)
Tequesta Fl 33469 (City/State and Zip Code)
For further information concerning this matter, please call:
CHEIS Aumacic at (561) 310 0758 (Name of Contact Person) at (561) 310 0758 (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 GORPORATIONS

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: A Home & BUILDING INSPECTION, INC. of Jupite
2. The principal office address: 19594 66 Tell. North
Jupille F1 33458
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/14/2000 Document number: 70000000 7405
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Maylene Aumack
19594 66 Tere. Noem PE = 7
Jupiter F1 33458
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Chais Aumada
(P.O. BOX NOT acceptable)
Tegresta F1 33469
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 of an officer or director) Way cyc Aumack (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 confirmation the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity.
(Type) 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
CR2E045 (8/05)