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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PROPERTY PROFESSIONALS PLUS, INC. (Name of corporation)
DOCUMENT NUMBER: P 01 0000 9 4-707
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:
SANDRA L. UNDERWOOD (Name of person)
PROPERTY PROFESSIONALS PLUS, INC. (Name of firm/company)
502 A So. FERDON BLVD. (Address)
CRESTULEW F1 32536 (City/state and zip code)
For further information concerning this matter, please call:
SANDRA L. UNDERWOOD at (850)683-1714 (Name of 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 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to th	e provisions of sections 607.0502,	617.0502, 607.1508, or 617.156	08, Florida Statutes,
this statement o	of change is submitted for a corpora	ition organized under the laws of	the State of
FLORIDA	in order to change its regis	tered office or registered agent,	or both, in the State
of Florida.	2	- O. A. A.	
1. The name of	f the corporation: PROPERTY	PROFESSIONALS PL	OS'ING.
2. The principa	al office address: 502 A	SO. FERDON BLVD	
	CRESTULEW, FI 32	536	
3. The mailing	address (if different): *SAME	. V 	<u> </u>
		<u> </u>	
4. Date of inco	rporation/qualification: 9-27-2	Document number:	PO1000094707
	nd street address of the current regist artment of State:	tered agent and registered office	on file with the
	SANDRA L. UND	DERWOOD	
	124 JOHN KIN	6 ROAD	_ = =
	CRESTUIEL FI	32539	
6. The name a	and street address of the new regist	tered agent (if changed) and /or	registered office (if
changed):	SANDRA L. UNI	DERWOOD	9
	502 A So. Fo	TRON BLUD	
	CRESTULEW, F		53 10A
agent, as chang	ress of its registered office and the s		
Such change wanthqrized by	vas authorized by resolution duly active board, or the corporation has be		
(Signature of an office	ef, chairman or vice chairman of the board)	SANDRA L. UNDER	ewood rees.
I hereby accep I further agree performance o registered age office address,	of the appointment as registered age to comply with the provisions of a of my duties, and I am familiar with the Or, if this document is being file I hereby confirm that the corporat	ent and agree to act in this capa ll statutes relative to the proper and accept the obligation of my ed merely to reflect a change in ion has been notified in writing	city. and complete position as the registered of this change.
Sauce	(Signature of Registered Agent)	21 AUG 20	03
If signing on beha		• ,	
	(Typed or Printed Name)	(Capacity)	
,	(1) Lan dy waterens ramens	()	

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