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(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Referral Xpress, Inc. (Name of Corporation)		
DOCUMENT NUMBER: P 0 2 0 5 0 0 2 9 5 4 4		
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:		
Christy Sanford (Name of Contact Person)		
Referral Xpress, Inc. (Firm/Company)		
4000 Guava Dr. (Address)		
Naples, FL 34104 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Christy Sanford at (B13) 493-1822 (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 Street Address: Amendment Section Division of Corporations Clifton Building		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (8/05)

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: Referral Xpress, Inc.
2. The principal office address: 4000 Guava Dr.
Naples, FL 34104
3. The mailing address (if different): 4000 Guava Dr.
Naples, FL 34/04 4. Date of incorporation/qualification: 3/12/02 Document number: P0200029544
4. Date of incorporation/qualification: 3/12/02 Document number: Po 2000 29544
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Christy Sanford - Referral Ypress, Inc. 2923 W. Santiago St.
2923 W. Santiago St.
Tampa, FL 33629
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Christy Sanford
4000 Guava Dr.
(P.O. Box NOT acceptable) Alaples Fig. 34104
9 m s
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.
Christy Sanford CHRISTY SAN FORD, OWNER/President (Signature of an othicer of director) (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.
Christy Sanford 12-27-07 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
CHRISTY SANFORD REFERRAL XPRESS, INC. (Typed or Printed Name)
(-)

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