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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: <u>RICH MAN</u> | POOR MANTAX & FINANCIAL SEAURES INC. |
|--|--|
| DOCUMENT NUMBER: PO200 | 0121115 |
| The enclosed Articles of Amendment and fee are sub- | mitted for filing. |
| Please return all correspondence concerning this matter | er to the following: |
| RICHARD (Name of Conta | DEMA 10 act Person) |
| RICH MAN POOR MANTAX 9 (Firm/ Com | FINANUAL SERVICES INC. |
| 4856 NW 104 (Address | El LANE |
| Conal SPAINES, FL | 33076 Zip Code) |
| For further information concerning this matter, please | |
| RICHAN DEMATO a (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | _ |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & \$\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) \$\$(Additional Copy is enclosed)\$ |
| Amendment Section A Division of Corporations D P.O. Box 6327 C | treet Address mendment Section ivision of Corporations lifton Building 661 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: RicH MAN POON MAN TAX & FINANCIAL SERVICES In |
| 2. The principal office address: 4856 NW 104 CANE |
| Conal spanos, Pl 33076 |
| 3. The mailing address (if different): 10693 WIRS MOAD #730 |
| <u>Conal Samos, PC 33076</u> |
| 4. Date of incorporation/qualification: _///3/02 Document number: |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Contonation Service Company 1201 HAYS STREET |
| 1201 HAYS STREET |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| RICHARD DEMALO |
| 4856 NW 104 D LANE (P.O. Box NOT acceptable) |
| Conal Spanbs, Fl 33076 PRINTE 5 |
| 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) Ruthard Danalo - Mas Dent (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 of Registered Agent) 9/28/05 (Date) |
| If signing on behalf of an entity: |
| Ruffrad Denato |
| (Typed or Printed Name) |

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

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