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(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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10/30/06--01005--020 **35.00

06 OCI 30 AMII: IZ SECRETARY OF STATE ALL AHASSEE, FLORIDA

W. 0, 30

TO: Amendment Section Division of Corporations	
SUBJECT: True Title	Exam, Inc.
DOCUMENT NUMBER: PO 3000	010364
The enclosed Statement of Change of Registered O	ffice/Agent and fee are submitted for filing.
Please return all correspondence concerning this ma	•
G-Patr	Contact Person)
(Name of	Contact Person)
True Ti	He Ebans. Inc
	n Harbor Blud, Ae. D.
Palm Ha	Address) Address) Le and Zip Code)
For further information concerning this matter, plea	
	at (777) 79A-1554 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the De	
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

CR2E045 (8/05)

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

i	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
	in order to change its registered office or registered agent, or both, in the State of Florida.
	1. The name of the corporation: True Title Exam, Inc
	2. The principal office address: 3005 State Road 590, Ae. 100
	Clearwater. FC 33759
	3. The mailing address (if different):
	4. Date of incorporation/qualification: 1-7-03 Document number: PU300000364
	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
	3005 Acte Road 590, Ac. 100
	Clearwater, FC 33759 SSR 3
	- I am not changing my registered agent For
	6. The name and street address of the new registered agent (if changed) and /or registered office address (if changed):
٨	resistored - 2138 Palm Har-bor Blud, He. D
ט	Palm Harbor, Florida 34623 (P.O. Box NOT acceptable)
	-I am not changing my registered agent -
	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) George Patrick Hand 127 (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.
	10-24-06
	(Signature of Registered Agent) (Date) If signing on behalf of an entity:
	(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * * ·