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(The municipal of Nicone)	
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
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(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CPA Biz, Inc. (Name of Corporation)
DOCUMENT NUMBER: P0300020565
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:
Trudy A Griffiths (Name of Contact Person)
CPA Biz, Inc. (Firm/Company)
9448 Walnut Crest Drive
(Address)
Orlando, Fl 32832 (City/State and Zip Code)
For further information concerning this matter, please call:
Trudy A Griffiths at (561) 324-4002 (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 CORPORATIONS

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	he corporation: CPA Biz, Inc.
2. The principal	office address: 9448 Walnut Crest Drive, Orlando, FL 32832
3. The mailing ac	ddress (if different): same as above
4. Date of incorp	oration/qualification: 2/19/2003 Document number: P0300020565
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the treent of State:
	Trudy A Griffiths
	2222 Justin Ave, Orlando 32826
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office Trudy A Griffiths 9448 Walnut Crest Drive, Orlando, FL 32832 (P O. Box NOT acceptable)
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
	TRUDY GRIFFIER - PRESIDENT
· -,	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The complete performance of a co
(Sig	nature of Registered Agent) (Date)
If signing on bel	nalf of an entity:
(T	yped 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)