

PO3000067670

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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Fax Number : (608) 827-5501

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**REGISTERED AGENT CHANGE
TRUGMAN VALUATION ASSOCIATES, INC.**

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Corporate Filing Menu

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TALLAHASSEE, FLORIDA

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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: TRUGMAN VALUATION ASSOCIATES, INC.
2. The principal office address: 1776 N Pine Island Rd Suite 314, Plantation, Florida 33322
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/18/2003 Document number: P03000067670
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (if resigned, enter resigned) _____

TRUGMAN, LINDA B, VP5543 SW 104TH TERRACECOOPER CITY, FL 33328

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Business Filings Incorporated515 E. Park Avenue, Tallahassee, Florida 32301

P.O. Box NOT acceptable

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]
Signature of an officer or director

Gary Trugman, President

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]
Signature of Registered Agent

5th day of July, 2013

Date

If signing on behalf of an entity:

Mark Williams, AVP

Typed 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

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