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We also

COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TADERS W. COPEZ For further information concerning this matter, please call: (Name of Contact Person) at (325) 223 - 4648 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 35 Filing Fee \$43.75 Filing Fee & □ \$52.50 Filing Fee ■\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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

 The name of the corporation: <u>APPRAISALS BEST, INC.</u> The principal office address: <u>8635 NW 8th ST. # 420 MIAMI, FL. 33126</u> 			
		, 	
3. The mailing address (if different):			
4. Date of incorporation/qualification: 9/18/03 Document number: P030	0001027	55	
5. The name and street address of the current registered agent and registered office on file Florida Department of State:	e with the SSEE, F	-8 AM	
AIDA STOCKING	— SIAT	6.	•
8635 NW 8th ST. # 420		ڪئي	
MIAMI FL 33126		•	
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):	d office		
OCTAVIO FERNANDEZ			
8635 NW 8th ST. # 420			
(P.O. Box NOT acceptable) MIAMI FL 33126	·	٠	
The street address of its registered office and the street address of the business office as changed will be identical.	of its registered	l agent,	
Such change was authorized by resolution duly adopted by its board of directors or battherized by the board, or the corporation has been notified in writing of the change			
OCTAVIO FERNANDEZ (Signature of an officer of director) OCTAVIO FERNANDEZ (Printed or typed name	PRESIDENT	1 	
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 of my duties, and I am familiar with and accept the obligation of my position as regist document is being filed merely to reflect a change in the registered office address, I have corporation has been notified in writing of this change.	complete perfo tered agent. O tereby confirm i	rmance r, if thi. that the	Š
(Signature of Registed Agent) (Signature of Registed Agent)	2	·	
If signing on behalf of an entity:			

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