PU366107053

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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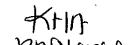
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06 NOV 13 PH 12: 47
SECRETARY OF STATE
ARLAHASSEE, FLORIDA



COVER LETTER 5

TO:	FO: Amendment Section Division of Corporations				
SUBJECT: PEO EXPERTS, INC. (Name of Corporation)					
DOCL	DOCUMENT NUMBER: P03000107053				
The en	enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:					
	WALTER H. MESSICK (Name of Contact Person	son)			
WALTER H. MESSICK, P.A. (Firm/Company)					
1900 CORPORATE BLVD., SUITE 305 WEST (Address)					
BOCA RATON, FLORIDA 33431 (City/State and Zip Code)					
For fu	urther information concerning this matter, please call:				
WAL	LTER H. MESSICK (Name of Contact Person) at (A	61) 995-8868 Lrea 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

		17.0502, 607.1508, or 617.1508, Florida		
		organized under the laws of the State of registered agent, or both, in the State of I		
1. The name of	the corporation: PEO EXPERTS	S, INC.		
	office address: 80 NE 5TH AVE			
	DELRAY BEACH			
3. The mailing a	address (if different):	N/A		
4. Date of incor	poration/qualification: 9/30/2003	Document number: P03000	0107053	
	d street address of the current regist rtment of State:	ered agent and registered office on file wi	ith the	
	WALTER H. MESSICK,	P.A	_	
	1900 CORPORATE BI	LVD., SUITE 200 EAST		
	BOCA RATON, FL 334	31	_	
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered of	fice	
	WALTER H. MESSICH	(P.A	SECTION OF	
		LVD., SUITE 305 WEST		
	(P.O. Box NOT acc		SEE LE	
	BOCA RATON, FL 334			
The street address changed will	ess of its registered office and the l be identical.	street address of the business office of i	ts Fegister Dagent,	
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.				
			ă	
` -	ure of an officer or director)	(Printed or typed name and	7	
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered ag to comply with the provisions of a nd I am familiar with and accept ti ing filed merely to reflect a chang s been notified in writing of this ci	ent and agree to act in this capacity. ll statutes relative to the proper and con he obligation of my position as registere e in the registered office address, I here hange.	nplete performance ed agent. Or, if this by confirm that the	
hatte-to	merink	11/1/06		
(Si	gnature of Registered Agent)	(Date)		
If signing on be	ehalf of an entity:			
WALTER H	I. MESSICK P.A.			
(*	Typed or Printed Name)			

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