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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: LAW OFFICES OF ROM	AINE N. BROWN, PA
DOCU	MENT NUMBER: P6300011	6197
The en	closed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
	return all correspondence concerning this matte	
ricasc	return an correspondence concerning and matter	w no tonowing.
		e Brown
	Name of Co	intact Person
	LAW OFFICES OF RO	MAINE N. BROWN, PA
		ompany
		venue, Suite 4F
	Add	lress
	Fort Lauderd	ale, FL 33301
		nd Zip Code
	romain abroum	1 @gmail.com
	romainebrown E-mail address; (to be used for	future annual report notification)
	(,
For fur	ther information concerning this matter, please	call:
	Romaine Brown	at (954) 937-0826
	Name of Contact Person	at (954) 937-0826 Area Code & Daytime Telephone Number 9 54 467-3367
Enclos	ed is a \$35.00 check made payable to the Depar	, ,
	24 10 4 2 2	G. 4411
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

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

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida	
in orde	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: LAW OFFICES OF ROMAINE N. BROWN, P.A.	
2. The principal	office address: 633 SE Third Avenue, Suite 4F, Fort Lauderdale, FL 33301	
3. The mailing a	address (if different): 633 SE Third Avenue, Suite 4F, Fort Lauderdale, FL 33301	
4. Date of incorp	poration/qualification: 10/16/2003 Document number: P03000116197	_
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Romaine Brown, Esquire	
	5220 S. University Drive, Suite 101	
	Davie, Florida 33328	
6. The name and (if changed):	Davie, Florida 33328 I street address of the new registered agent (if changed) and /or registered office AHASSET AND AHASSET AND AND AND AND AND AND AND AN	
	Romaine Brown, Esquire	_
	633 SE Third Avenue, Suite 4F	
	P.O. Box NOT acceptable	
	Fort Lauderdale, FL 33301	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.	
Konrue	Romaine Brown, Principal Director Printed or typed name and title	
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance all am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
* OME	nature of Registered Agent 12/8/09	
If signing on be	half of an entity:	
Roma	aine Brown, Esquire	
	yped or Printed Name	

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