P04000039956

(Re	questor's Name)	,	
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phono	e #)	
PICK-UP	WAIT	MAIL.	
; (Bu	siness Entity Nar	me)	
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	TECT: Change of Address Realty Experts, (Name of Corp.)	Inc.
DOCI	UMENT NUMBER: P04000039956	
The er	nclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
	e return all correspondence concerning this matter to	_
	Susan M. Sweetser	
	(Name of Contact	t Person)
	Change of Address Realty Experts, Inc (Firm/Comp	
	971 Worthington Court	
	(Address)
	Oviedo, FL 32765	
	(City/State and 2	Cip Code)
For fu	orther information concerning this matter, please call:	
Susar	n M. Sweetser (Name of Contact Person)	At (407-) 788-2914 (Area Code & Daytime Telephone Number)
Enclos	sed is a \$35.00 check made payable to the Departmen	nt 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 cha	provisions of sections 607.0502, 617.0502, 60 nge is submitted for a corporation organized r to change its registered office or registered	lunder the laws of the State of FLC	RIDA		
1. The name of t	he corporation: Change of Address Realty E	experts, Inc.			
2. The principal Oviedo, FL	office address: 971 Worthington Court		**		
	ddress (if different):				
4. Date of incorp	poration/qualification: 03-01-04	Document number: P040000399	56		
	street address of the current registered agent tment of State:	and registered office on file with th	e		
	Susan M. Sweetser				
	1067 Rainer Dr., Suite 1001		,		
	Altamonte Springs, FL 32714		SECI	27	
6. The name and (if changed):	street address of the new registered agent (if	f changed) and /or registered office	RETARY	NUG 21	FILE
	Susan M. Sweetser		14.30 10.50	PH	U
	971 Worthington Court		TATE ORID	12: 2:	
	(P.O. Box NOT acceptable) Oviedo, FL 32765		D'	ပ	
The street addre	ess of its registered office and the street add be identical.	ress of the business office of its re	gistered :	agen	t,
Such change was authorized by the	as authorized by resolution duly adopted by ne board or the corporation has been notified	its board of directors or by an offi ed in writing of the change.	cer so		
(Signatu	ire of an officer or director)	Susan M. Sweetser (Printed or typed name and title)			
I hereby accept I further agree to of my duties, an document is bei	the appointment as registered agent and as to comply with the provisions of all statutes d I am familiar with and accept the obligat ng filed merely to reflect a change in the re s been notified in writing of this change.	eree to act in this capacity.	te perfor gent. Or, onfirm th	mand if th nat th	ce is e
		August 15, 2007			i
	gnature of Registered Agent)	(Date)			
Susan M. Sw	half of an entity:		•		
	Typed or Printed Name)				

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (8/05)

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