PO400059116

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TALLAHASSEF FINDINA

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COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT: Residential Design Profession: (Name of Corp.)	als, Inc.
DOCUMENT NUMBER: P04000059116	
The enclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
J Victoria Garbacik Kopman, (
(Name of Contac	et Person)
J Victoria Garbacik-Kopman, (Firm/Comp	
10688 Old St Augustine Road (Address	
Jacksonville, FL 32257 (City/State and 2	Cip Code)
For further information concerning this matter, please call:	
J Victoria Garbacik Kopman	,t (904) 880-9803
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed 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

TO:

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

Rursuant 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: Residential Design Professionals, Inc.
2. The principal office address: 4439 Ashmont Court
Jacksonville, FL 32257
3. The mailing address (if different): 3617 Crown Point Road, Suite 2
Jacksonville, FL 32257
4. Date of incorporation/qualification: April 2, 2004 Document number: P04000059116
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Kevin Green
3617 Crown Point Road, Suite 2
Jacksonville, FL 32257
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
J Victoria Garbacik-Kopman, CPA
10688 Old St Augustine Road, Suite 4 (P.O. Box NOT acceptable)
Jacksonville, FL 32257
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 or (profiter or director) TIM Little - 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.
Alichan Signature of Registered Agent) 9/30/2005. Onto)
If signing on behalf of an entity:
(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