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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Roberts JUL 09 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2010

KEN BERQUIST
S2E EXPERTS INC
8221 ALLENDALE CT
NAPLES, FL 34120

SUBJECT: S2E EXPERTS, INC.
Ref. Number: P04000148325

We have received your document for S2E EXPERTS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 510A00016127

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S2E EXPERTS, INC
Name of Corporation

DOCUMENT NUMBER: P04000148325

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEN BERQUIST
Name of Contact Person

S2E, EXPERTS INC
Firm/Company

8221 ALLENDALE CT
Address

NAPLES, FL 34120
City/State and Zip Code

KBERQUIST@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEN BERQUIST at (617) 512-4280
Name of Contact Person Area 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**

Pursuant 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: S2E Experts, Inc.
2. The principal office address: 8221 Allendale Court
Naples, FL 34120
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/27/04 Document number: P04000148325
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

John Zizza, Esq.

418 Seagull Ave

P.O. Box NOT acceptable

Naples, FL 34102-2150

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DIVISION OF STATE
REGISTRATION
TALLAHASSEE, FLORIDA

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 of an officer or director

Ken Berquist, 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.


Signature of Registered Agent

July 6, 2010

Date

If signing on behalf of an entity:

John Zizza, Esq.

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