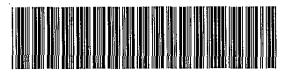
## P05000057351

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(Re	equestor's Name)	
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(C)	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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DIVISION OF CORPORATIONS
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: INTEGRATED PROFESSIONAL SERVICES, INC. (Name of corporation)
DOCUMENT NUMBER: P05000057351
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:
Kim Douglas Sherman, Esq. (Name of contact person)
Sherman Law Offices, Chartered (Firm/Company)
1000 Corporate Drive, Suite 310 (Address)
Fort Lauderdale, FL 33334 (City/state and zip code)
For further information concerning this matter, please call:
Kim Douglas Sherman, Esq. at (954 ) 489-9500  (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

	orovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida	-
	r to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	he corporation: INTEGRATED PROFESSIONAL SERVICES, INC.	
2. The principal	office address: 2711 N.E. 5th Street, Pompano Beach, FL 33062	
3. The mailing ac	ddress (if different):	٠
4. Date of incorp	poration/qualification: April 18, 2005 Document number: P05000057351	*EL.
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the tment of State:	
	Joseph Leventhal	
:	2711 N.E. 5th Street	-
	Pompano Beach, FL 33062	
6. The name and (if changed):	Pompano Beach, FL 33062  Street address of the new registered agent (if changed) and /or registered office  Street address of the new registered agent (if changed) and /or registered office	
	Joseph Leventhal	
	999 N.W. 31st Ave.	
	(P.O. Box NOT acceptable)	
	Pompano Beach, FL 33069	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa	is authorized by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change.	
	Just Leventhal Chief Execume Office (Printed or typed name and title)	R,
I hereby accept I further agree to of my duties, and document is being 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 of a land agree the obligation of my position as registered agent. Or, if this ag filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	•
(\$\frac{1}{8}\text{g}	mature of Registered Agent)  Tyme 23 2005  (Date)	
If signing on bel	half of an entity:	٠
	Vined or Printed Name	

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