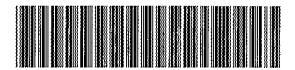
P05000073468

(Requestor's Name)
(Address)
(Address)
(waste)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Little)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
}

Office Use Only



100077218701



07/10/06--01032--021 **35.00

Ro chy

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Hobert INVESTMENT Advisors, IVC. (Name of Corporation)
DOCUMENT NUMBER: P05000073468
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:
Richard HEBERT (Name of Contact Person) Hobert Invest Ment Advisors, INC. (Firm/Company)
(Firm/Company) 6389 Longlake DR.
Port Orange, FL 32128 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (40) 489-9398 (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 \top\to\to\to\to\to\\in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Hobert Tuvestwent Advisors, Tuc.
2. The principal office address: 6389 OPARE DR. (Nau)
Part ORANGE, FZ 32128
3. The mailing address (if different):
4. Date of incorporation/qualification: MN 18, 2005 Document number: PO 50 000 73 468
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Righter C. Hebset
1070 CRYSTAL CREEK DR. ES & -
Port ORANGE, FL 32128
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Richard C. Hebert
G389 LOPG AVE DR. (P.O. BOX NOT acceptable)
Part ORANGE FL 32/28
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.
Almut Right C. Hebert, President
(Finited or typed name and tile) 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 locument 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) 7/5/06
f signing on behalf of an entity:
Richard C. Hebert
(Typed or Printed Name)

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