P06000013841

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SECRETARY OF STATE
ALLAHASSEE: FLORIDI

COVER LETTER

	endment Section ision of Corporations	
SUBJECT:	2% Fee Realty, Inc. (Name of Corp.)	oration)
DOCUME	NT NUMBER:_ P06000013841	
The enclose	d Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return	n all correspondence concerning this matter to	the following:
	Michael Whipple (Name of Contact	ct Person)
	2% Fee Realty, Inc. (Firm/Comp	pany)
	3275 SE Federal Hwy. #199 (Address	3)
	Stuart, FL 34997	
	(City/State and 2	(ip Code)
For further i	nformation concerning this matter, please call	
Michael Wh	(Name of Contact Person)	at (502) 327-3301 (Area Code & Daytime Telephone Number)
Enclosed is	a \$35.00 check made payable to the Departme	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, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: 2% Fee Realty, Inc.
2. The principal Stuart, FL 3	office address: 3275 SE Federal Hwy. #199
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 1/27/2006 Document number: P06000013841
	d street address of the current registered agent and registered office on file with the etment of State:
	Michael C. Whipple
	2600 S. Kanner Hwy. #Z-5
	Stuart, FL 34994
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Michael C. Whipple
	3275 SE Federal Hwy. #199
	(P.O. Box NOT acceptable) Stuart, FL 34997
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
/// (Signati	Michael Whiple Pres. (Printed or typed name and title)
	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 I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.
Muj	gagare of Registered Agent) 8/29/07 (Dayle)
/	half of an entity:
(1	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 * * *