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1502 6/2/10

COVER LETTER

TO: Amendment Section Division of Corporations	i					
SUBJECT: ABSOLUTE REALTY MANAGEME Name of Corporatio	NT GROUP, INC					
DOCUMENT NUMBER: P06000077	7959					
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.					
Please return all correspondence concerning this matter to the fo	llowing:					
COURTNEY DAV Name of Contact Pers						
ABSOLUTE REALTY MANAGME Firm/Company	ENT GROUP, INC					
195 WEKIVA SPRINGS RD Address	SUITE 102					
LONGWOOD, FL 32 City/State and Zip Co	2779					
COURTESSA@AOL.COM E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
COURTNEY DAVIS at (407) 493-8329 rea Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of S	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	nge is submitted for a corp	oration organize	607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Stat	te of FLORIDA
			TY MANAGEMEN	
•	office address: 195 WE			1 0,1001 , 1110
	OD, FL 32779			
3. The mailing a	ddress (if different): 195	WEKIVA SPF	RINGS RD SUITE 102	
LONGW	OOD, FL 32779			
4. Date of incorp	ooration/qualification:	6/6/06	Document number:	P06000077959
5. The name and Florida Depar	I street address of the curre tment of State: (If resigned ABSOLUTE REACTY 505 WEKIVA SPRIN	i, enter resigned) MANAGE ME	nt and registered office on the Court New Flav I NT GROUP, INC. 650	file with the
	LONGWOOD, FL 32	2779		<u>. </u>
				7.0 2
6. The name and (if changed):	ABSOLUTE REALT 195 WEKIVA SPRIN	y managen	_ , , ,	red office FECRETARY OF
	LONGWOOD, FL 32		<u> </u>	
		P.O. Box NOT a	ecceptable	a difficulty of the second
The street address changed will	ess of its registered office be identical.	and the street ac	ddress of the business offic	ce of its registered agent,
Such change was authorized by the	as authorized by resolutione board, or the corporation	n duly adopted l on has been noti	by its board of directors or fied in writing of the chan	by an officer so ge.
Canhen	c of an officer or director	<u> </u>	COURTNEY Printed or typed name	
I further agree of my duties, an document is bei	the appointment as regist to comply with the provisi d I am familiar with and ing filed merely to reflect s been notified in writing	ions of all statut accept the oblig a change in the	agree to act in this capaci es relative to the proper a ation of my position as reg registered office address,	ty, nd complete performance gistered agent. Or, if this I hereby confirm that the
· Canthay	4th Dans		6/15/	/10
€ ig	nature of Registered Agent		Date	,
If signing on be	chalf of an entity:		2 - 1	
Т	yped or Printed Name		·	

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