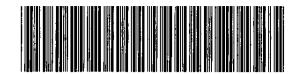
Po6000131790

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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10/22/08

COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJI	ECT: Residential Valuation Group, Inc (Name of Corp	oration)	
DOCL	UMENT NUMBER: P06000131790		
The en	closed Statement of Change of Registered Office/A	gent and fee are submitted for filing.	
Please	return all correspondence concerning this matter to	the following:	
Joseph Daniels (Name of Contact Person)			
	, (Name of Contac	et Person)	
Residential VAluation Group, Inc. (Firm/Company)			
	4083 Sunbeam Rd., #1701 (Address)		
	Jacksonville (City/State and 2	, FL 32257 (ip Code)	
For fur	ther information concerning this matter, please call:		
	Joseph Daniels (Name of Contact Person)	nt (904) 563-3063 (Area Code & Daytime Telephone Number)	
Enclose	ed is a \$35.00 check made payable to the Departmen	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, 607.15 ange is submitted for a corporation organized unde er to change its registered office or registered agen	er the laws of the State of Florida
1. The name of t	the corporation: Residential Valuation Grou	p. Inc.
2. The principal	office address: 4083 Sunbeam Rd., #1701,	, Jacksonville, FL 32257
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: October 16, 2006 Doc	cument number: P06000131790
	d street address of the current registered agent and r runent of State: (If resigned, enter resigned)	registered office on file with the
	Agents & Corporations, Inc.	
	Suite E, 773 4th Ave. N.	z
	Naples, FL 34102	TAPEC BOOK
6. The name and (if changed):	d street address of the new registered agent (if change	ged) and /or registered office
	Joseph Daniels	The w
	4083 Sunbeam Rd., #1701 (P.O. Box NOT acceptable)	ST. ST.
	Jacksonville, FL 32257	· cr
The street addre	ess of its registered office and the street address o be identical.	of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its be ne board, or the corporation has been notified in v	oard of directors or by an officer so writing of the change.
(Signatu	John Danie	Joseph Daniels, President (Printed or typed name and tifle)
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered agent and agree to to comply with the provisions of all statutes relate dI am familiar with and accept the obligation of ing filed merely to reflect a change in the register s been notified in writing of this change.	•
_ Jesy	of Dail	15 October 2008
	gnature of Registered Agent)	(Date)
ti signing on bei	half of an entity:	
(T	yped or Printed Name)	
	* * * FILING FEE: \$35.00	0 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314