P07000085894

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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

a.A. Chang

C. Couffietts NOV 2:8 2007,

COVER LETTER

Division of Co	orporations	
KB SUBJECT: RELIAE	SLE SERVICES, INC (Name of Co	rporation)
DOCUMENT NUME	ER: P07000085894	
The enclosed Statemer	nt of Change of Registered Office	Agent and fee are submitted for filing.
Please return all corres	pondence concerning this matter t	to the following:
KE	VIN BRADFORD (Name of Cont	act Person)
<u>KB</u>	RELIABLE SERVICES, INC (Firm/Cor	npany)
651	NE 2ND COURT #202 (Addre	ess)
PON	MPANO BEACH FL. 33064 (City/State and	l Zip Code)
For further information	concerning this matter, please ca	ılı:
KEVIN BUTLER (Name	of Contact Person)	at (954) 226-7486 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 c	heck made payable to the Departn	nent 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

POMPANC 3. The mailing at the second		Document number: P07000085894	
3. The mailing a4. Date of incor5. The name an	poration/qualification: 07-30-2007 I street address of the current registered agtment of State: KEVIN BRADFORD	Document number: P07000085894	
4. Date of incor 5. The name an	poration/qualification: 07-30-2007 I street address of the current registered agtment of State: KEVIN BRADFORD	Document number: P07000085894	
5. The name an	I street address of the current registered ag tment of State: KEVIN BRADFORD		
	tment of State: KEVIN BRADFORD	gent and registered office on file with the	
	651 NE 42ND COURT #202		
	POMPANO BEACH FL 33064		
6. The name and (if changed):	l street address of the new registered agen	at (if changed) and /or registered office	SECRI
	KEVIN BUTLER		CRETARY
	651 NE 42ND COURT #202		SEE O YS
	(P.O. Box NOT acceptable)		75
	POMPANO BEACH FL 33064		ORI ORI
The street addr as changed wil	ess of its registered office and the street be identical.	address of the business office of its register	ed agent,
Such change w authorized by t	as authorized by resolution duly adopted ne board, or the corporation has been no	l by its board of directors or by an officer so tified in writing of the change.)
		KEVIN BUTLER BRADFORD.	
	the appointment as registered agent and to comply with the provisions of all state and I am familiar with and accept the obli- ing filed merely to reflect a change in the been notified in writing of this change.	(Printed or typed name and title) d agree to act in this capacity. utes relative to the proper and complete per igation of my position as registered agent. e registered office address, I hereby confirm	formance Or, if this 1 that the
Kart		11-14-2007	
. (Si	gnature of Registered Agent)	(Date)	
If signing on be	half of an entity:		

APPROVE

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)