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(Requestor's Name)				
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(City/State/Zip/Phone #)				
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COVER LETTER

TO:	Amendment Section Division of Corporations					
SUBJE	ECT: Wealth Strategies Marketing, In (Name of Corp	ocration)				
DOCU	MENT NUMBER: P0700096496					
The en	closed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to	the following:				
Robin K. Davies (Name of Contact Person)						
	(, , , , , , , , , , , , , , , , , , ,					
	Wealth Strategies Marketing, Inc.					
(Firm/Company)						
10180 N.W. 39th Court (Address)						
	(,				
Coral Springs, Florida						
(City/State and Zip Code)						
For fur	ther information concerning this matter, please call	l:				
	Robin K. Davies	at (954) 701-7158				
	(Name of Contact Person)	at (<u>954</u>) 701-7158 (Area Code & Daytime Telephone Number)				
Enclose	ed is a \$35.00 check made payable to the Departme	ent of State.				
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle				
	rananassee, i D 52517	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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.						
1. The name of th	e corporation: Wealth Strategies Ma	arketing, Inc.				
2. The principal of	ffice address: 10180 N.W. 39 Court	, Coral Springs, Florida 33065				
3. The mailing ad	dress (if different):					
4. Date of incorpo	ration/qualification: August 28,2007	Document number: P07000964	496			
	street address of the current registered age nent of State: (If resigned, enter resigned)					
<u>.</u>	Corporation Information Services,	Inc.				
_	1201 Hays Street					
- -	allahassee, Florida 32301					
6. The name and street address of the new registered agent (if changed) (if changed):		(if changed) and /or registered office	_C	09 MAR	771	
-	Robin K.Davies		D>	~ 30	F	
	10180 N.W. 39th Court, Coral Spi (P.O. Box NOT acceptable)	rings, Florida	OF STAIL	_ ∰ :: C	ED	
The street address as changed will be	s of its registered office and the street ac e identical.	Idress of the business office of its regis	tered a	ن agent	,	
Such change was authorized by the	authorized by resolution duly adopted learn, or the corporation has been notified.	by its board of directors or by an office fied in writing of the change.	r so			
Thut I Signatur	of an officer of director)	Robin K. Davies, Preside	<u>ent</u>			
I hereby accept t I further agree to of my duties, and document is bein corporation has	he appointment as registered agent and comply with the provisions of all statut I am familiar with and accept the obligg filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete p ation of my position as registered agen registered office address, I hereby conf	perfort t. Or firm th	manc if thi	e is e	
Spring	ature of Registered Agent)	03/25/09 (Date)				
If signing on beh		(17dic)				
	Robin K. Davies					

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

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