## P08000074602

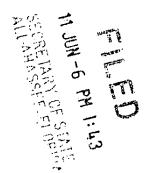
(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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DAChans 6/7/11 QDRO direct, LLC

QDRO and Pension Consultants

¥35.00

May 3, 2011

Attn: Darlene

Registration Section

Division of Corporations PO Box 6327 [ ] if the Blag. 2661 Executive Center Circle Tallahassa Fr. 2007.

Tallahassee, FL 32314 71 30

RE: Change of Address and Registered Agent Address Change

Enclosed please find check# 7447 in the amount of \$145 for the Address Change and Address Change for the Registered Agents for the following:

- 1. QDRO Direct, LLC
- -2. Pesso Properties, LLC
  - 3. Pesso Properties II, LLC
  - 4. Steven Pesso, P.A.
- -5. Pesso Advisor Group, Inc.

Please process the enclosed requests as soon as possible.

If you have any questions you may contact me at: (561) 394-2337.

Thank you,

anen Moyer-Pesso

Sanctuary Center Suite E-302 4800 N. Federal Hwy. Boca Raton, FL 33431

Tel: (561) 394-2337 Fax: (561) 394-2197

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: PUSSO AND SIVE PROUP, INC.
·
DOCUMENT NUMBER: \$\frac{P0800074602}{}\$
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Pesso AMSN Group, Inc.
Sanctuary Center Suite E-302
Address 4800 N. Fedeval Hwy.  Porca Raton, Fr 33431  City/State and Zip Code
City/State and Zip Code  IMPESSI All-UM  E-mail address: (to be used for future annual report notification)
2. mail address. (to be used for fatale almual report notification)
For further information concerning this matter, please call:
Janen mover Passo at (541) 394-2337
Name of Contact Person Area Code & Daytime Telephone Number

-Enclosed is a \$35:00 check made payable to the Department 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

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 <u>Florida</u>
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Pesso Advisor Group INC.
2. The principal office address: Sanctuary Center, Suite E-302
4800 N. Federal HWY. Boca Ratm, Fr 33431
3. The mailing address (if different):
4. Date of incorporation/qualification: 08/11/08 Document number: POS 1000 7-4602
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Janen Moger Ress8
350 camino Gardens Blvd. #107
Boca Ratm, Fr 33432
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Janen moner lesso
Sanctuary Center, Suite E-302 = 5
4800 N. Flaval Hwy.
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an elite of director Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been monified in writing of this change.
Signature of Registered Again Date
If signing on behalf of an entity.
Junen Morger Ples 80
Typed or Printed Name

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