P08000081985

(Requestor's Name)			
	Address)		
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(<i>j</i>	Address)		
((City/State/Zip/Phone #)		
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(E	Business Entity Name)		
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OIVISIONE OF CORPORAGE

RARDON8 MANNIZ

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Practical Debt Relief, Inc.

Name of Corporation

DOCUMENT NUMBER: P08000081985

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:

Greg Pesetsky

Name of Contact Person

Practical Debt Relief, Inc.

Firm/Company

5210 South University Drive, Ste 104

Address

Davie, Florida 33328

City/State and Zip Code

greg@practicaldebtrelief.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Greg Pesetsky

.786 \202-8107

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

62 44

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this mized under the laws of the State of Florida tered agent, or both, in the State of Florida.
1. The name of	the corporation: Practical debt Re	lief, Inc.
2. The principal	office address: 5210 South Unive	ersity Drive, Suite 104
	orida 33328	
3. The mailing a	address (if different):	
4. Date of incorporation/qualification: 09/05/2008 Document number: P080000819		Document number: P0800081985
	d street address of the current registered rtment of State: (If resigned, enter resigned)	agent and registered office on file with the ned)
	Rogelio Rodriguez	
	1041 NE 207 Street	
	Miami, Florida 33179	
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered office
	Greg Pesetsky	
	16570 SW 37th Street	OT acceptable
	Miramar, Florida 33027	T acceptable
The street addr as changed will	ess of its registered office and the stree be identical.	t address of the business office of its registered agent,
Such change was authorized by the	as authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.
Signati	ire of an officer or director	Greg Pesetsky, President/Registered Agent Printed or typed name and title
I herehy accent	the appointment as registered agent a	**
dry	Pesetty	07/11/2012
U	nature of Registered Agent	Date
- -	chalf of an entity:	
	ebt Relief, Inc. yped or Printed Name	
		DD 00500111

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