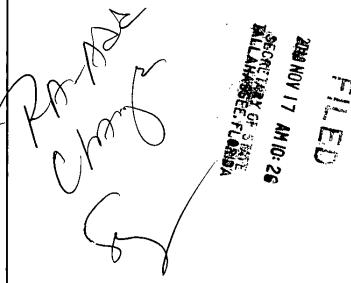
(Requestor's Name)	
(Address)	8001877475
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	11/17/1001010015
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Affordable Trans Inc. Name of Corporation		
DOCUMENT NUMBER: P100000 8 2 50		
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		
Firm/Company		
11471 West Sample Rd, Ste 4		
Coul Springs FL 33065 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call: Bio Codo 20 at (954) 410 - 2990 Name of Contact Person at (Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		

of 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 ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Affordable Trans Inc.
2. The principal office address: 11471 West Sample Rd. Ste 4
Grad Springs, FL 33065
3. The mailing address (if different):
4. Date of incorporation/qualification: 1017/10 Document number: P100000 \$2307
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)
Cardozo Brian D
28150 NW 69th Terr
Margate, FL 33063
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Codozo Brion B
11471 West Sangle Rd Stelling -
Coral Springs FL 33065
2
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 officer or director Printed or types 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 notified in writing of this change.
11/15/10
Signature of Registered Agent Date
If signing on behalf of an entity:
Affodolla ros Inc.

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