

P10000094993

(Requestor's Name)

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R.A. Chg.

C.COULLETTE

SEP 22 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Accountability Partnership Inc
Name of Corporation

DOCUMENT NUMBER: P10000094993

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:

Angela Walker
Name of Contact Person

Accountability Partnership
Firm/Company

147 Senla Ave.
Address

Royal Palm Bch. FL 33411
City/State and Zip Code

angiewalker01@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Walker at (561) 385-5253
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Accountability Partnership Inc.
2. The principal office address: 147 Sevilla Ave
Royal Palm Bch, FL 33411
3. The mailing address (if different): same
4. Date of incorporation/qualification: 11/19/2010 Document number: P1000094993

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)

William Peery Jr
870 Manha Del Ray Lane # 6
West Palm Bch, FL 33401

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

William Peery Jr
7225 Deer Point Ln.
P.O. Box NOT acceptable
West Palm Bch, FL 33411

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

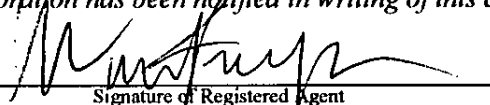
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

William A Peery

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 notified in writing of this change.


Signature of Registered Agent

8/16/11
Date

If signing on behalf of an entity:

William A. Peery
Typed or Printed Name

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

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