

PLb000031643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

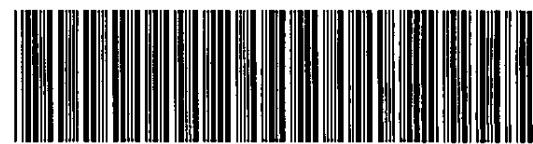
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NOV 22 2016

C. CARROTHERS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 NOV 17 AM 12: 00

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Special Asset Advisors, Inc.

Name of Corporation

DOCUMENT NUMBER: P16000031643

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:

Brian Burnett

Name of Contact Person

Special Asset Advisors, Inc.

Firm/Company

6606 Villa Sonrisa Drive #920

Address

Boca Raton, FL 33433

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Contact Person _____ at (_____) _____ 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: Special Asset Advisors, Inc.
2. The principal office address: 6606 Villa Sonrisa Drive #920, Boca Raton, FL 33433

3. The mailing address (if different): 6606 Villa Sonrisa Drive #920, Boca Raton, FL 33433

4. Date of incorporation/qualification: 04/07/2016 Document number: P16000031643

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)

Brian Burnett

206 S. Compass Drive

Fort Pierce, FL 34949

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

Brian Burnett

6606 Villa Sonrisa Drive #920

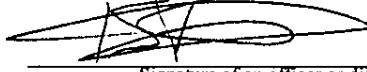
P.O. Box NOT acceptable

Boca Raton, FL 34949

2016 NOV 17 AM 12:00
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TALLAHASSEE, FLORIDA

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.

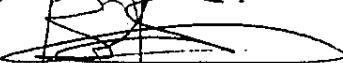


Signature of an officer or director

Brian Burnett, President

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

11/14/206

Date

If signing on behalf of an entity:

Special Asset Advisors, Inc.

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
CR2E045 (03/12)