## P96000048405

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2008 FEB -4 PM 1:48
SECKETARY OF STATE
TALLAHASSEE. FLORIDA

R.A. Change

TR - MAG

## **COVER LETTER**

Division of Corporations			
SUBJECT: Professional Placement Services, Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: P96000048405			
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:			
Susan Etheridge			
(Name of Contact Person)			
Professional Placement Services, Inc. (Firm/Company)			
(Firm/Company)			
908 West Horatio, Suite A (Address)			
(Address)			
Tampa, FL 33606			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Susan Etheridge at ( 813 ) 831-2889/			
Susan Etheridge at ( 813 ) 831-2889/ (Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section  Amendment Section  Division of Corporations  Division of Corporations			
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle			

Tallahassee, FL 32301

TO:

Amendment Section

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

Pursuant to the provisions of sections 607.0502, 617.0502, 60 statement of change is submitted for a corporation organized in order to change its registered office or registered	under the laws of the State of Florida	his ——–
The name of the corporation: Professional Placement S		
2. The principal office address: 908 West Horatio Street, 9		
3. The mailing address (if different): P.O. Box 130536, Ta	ampa, FL 33681-0536	
4. Date of incorporation/qualification: May 29, 1996	Document number: P96000048405	i
5. The name and street address of the current registered agent Florida Department of State:	and registered office on file with the	
CorpDirect Agents, Inc.	<b>=</b>	200
515 East Park Avenue	——————————————————————————————————————	A T
Tallahassee, FL 32301	HASS	B-L
6. The name and street address of the new registered agent (if (if changed):	changed) and /or registered office	2008 FEB -4 PH 1:48
Daniel D. Whitaker, Esquire		# <b>6</b>
Carey, O'Malley, Whitaker & M	anson, P.A.	17
712 South Oregon Avenue, Ta	ampa, FL 33606	
The street address of its registered office and the street address changed will be identical.	ress of the business office of its register	red agent,
Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been notified	its board of directors or by an officer s	0
(Signature of an officer or director)	Susan Etheridge, President (Printed or typed name and title)	
I hereby accept the appointment as registered agent and as I further agree to comply with the provisions of all statutes of my duties, and I am familiar with and accept the obligate document is being filed merely to reflect a change in the recorporation has been notified in writing of this change.	relative to the proper and complete per ion of my position as registered agent. gistered office address, I hereby confir	
(Signature of Registered Agent)	1/31/08	
If signing on behalf of an entity:	(Date)	
<u> </u>		
(Typed or Printed Name)		
* * * FILING FEE: S	\$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)