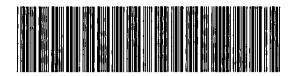
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	BIF Investments Incorporated
	Name of Corporation
DOCUMENT NU	P97000059492
The enclosed State	ement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to the following:
	The second secon
	Christopher Schott
•	Name of Contact Person
	Burrus Investment Group, Inc.
	Firm/Company
	401 Veterans Blvd., #102
	Address
00 44	
B: 00	Metairie, LA 70005 City/State and Zip Code
	City/state and Zip Code
	cds@burrusgroup.com
2000年	E-mail address: (to be used for future annual report notification)
NOV 16 RETARY BAHASSEE.	(F,
For further informa	ation concerning this matter, please call:
	Chris Schott at (504) 212-1692
Nan	Chris Schott at (504) 212-1692 me of Contact Person Area Code & Daytime Telephone Number
14411	Table 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2009

CHRISTOPHER SCHOTT BURRUS INVESTMENT GROUP, INC. 401 VETERANS BLVD., #102 METAIRE, LA 70005

SUBJECT: BIF INVESTMENTS INCORPORATED

Ref. Number: P97000059492

We have received your document for BIF INVESTMENTS INCORPORATED, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 409A00035720

' 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: BIF Investments Incorporated
2. The principal office address: 64 Lake Dr. Palm Beach Shores, FL 33404
3. The mailing address (if different): 401 Veterans Bvld., #102
4. Date of incorporation/qualification: 06/09/1997 Document number: P97000059492
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)
Valdes-Faul, Corporate Services, Inc. 1715. Flagler Drive, Suite 500 East
West Palm Beach, Fl 33401
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
P.O. Box NOT acceptable
Palm Beach Shores, FL 33404
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.
Christopher Schott - Secretary Signature of an officer or director Christopher Schott - Secretary 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 Date
If signing on behalf of an entity:
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 (8/05)