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COVER LETTER

COVEREDITER					
TO: Amendment Section Division of Corporations					
SUBJECT: Resolve Disputes Inc (Name of Corporation)					
DOCUMENT NUMBER: P9800043298					
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) Resolve Disputes, Inc. (Firm/Company) One Las Olas Circle, Suite 1215 (Address)					
Fort Lauderdale FL 33316 (City/State and Zip Code)					
· • • • • • • • • • • • • • • • • • • •					
For further information concerning this matter, please call:					
(Name of Contact Person) at (954), 523-5418 (Area Code & Daytime Telephone Number)					
(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

	provisions of sections 607.0502, 6 ange is submitted for a corporation		_	
-	er to change its registered office or	-		
1. The name of	the corporation: Resolu	a Dispotes,	Inc.	,
2. The principal	office address: One L Fort	Lauder dela	rele Suite	1215
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification:	Document	number: <u>19800</u>	0043298
	d street address of the current regis	stered agent and register	ed office on file with th	e
	Rumin Edua	dR. Esq		
	2720 East 0	lakland Park	Blud, Suite	06 APR 27
	Fort Lauder do	ib FL 32	3306	野門
6. The name and (if changed):	d street address of the new register	ed agent (if changed) ar	ad /or registered office	SEE F. F.
	Rumin, Edua	JK. Esq		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	2755 East (P.O. Box NOT a	Oakland Par	k Blud Sute	304 5
	Fort Laider	dolo FL 3	3306	
The street addr	ess of its registered office and the	e street address of the b	ousiness office of its re	gistered agent,
Such change w authorized by t	ras authorized by resolution duly the board, or the corporation has	adopted by its board of been notified in writing	f directors or by an off g of the change.	icer so
John	fure of an officer or director)		Jun A. Sm	1,12
\ \ \ \ \	t the appointment as registered a to comply with the provisions of nod I am familiar with and accepting filed merely to reflect a chan is been notified in writing of this	gent and agree to act i all statutes relative to the obligation of my p ge in the registered off change.	n this capacity, the proper and comple osition as registered as ice address, I hereby c	te performance zent. Or, if this onfirm that the
	ignature of Registered Agent)		424/06 (Dale)	
If signing on be	ehalf of an entity:			
	(Typed or Printed Name)	- .		

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