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(RE	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Mathan

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJE	CCT; A.C. Roman & Associates, Inc. (Name of corporation)
DOCU	MENT NUMBER: F02000005616
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please:	return all correspondence concerning this matter to the following:
	Anthony C. Roman
	(Name of contact person)
	A.C. Roman & Associates, Inc.
	(Firm/Company)
	300 Mentick Road (Address)
	(Address)
	Laborate No. 10 Acres de Carres
	Lynbrook, New York 11563 (City/state and zip code)
Con fin	ther information concerning this matter, please call:
rortur	mer miormation concerning this matter, please can.
Anthor	(Name of contact person) at (516) 596-3300 (Area code & daytime telephone number)
	(Name of contact person) (Area code & daytime telephone number)
Enclos	ed 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 409 E. Gaines Street Tallahassee, FL 32399

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 New York in order to change its registered office or registered agent, or both, in the State of Florida.
I. The name of the corporation: A.C. Roman & Associates, Inc.
2. The principal office address: 300 Merrick Road, Lynbrook, New York 11563
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/07/02 Document number: F0200000556
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
NMT Investments, Inc.
1800 Second Street, Suite 810
Sarasota, FL 34236
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Thomas Pellegrino
1800 Second Street, Suite 810
(P.O. Box NOT exceptable) Sarasota, FL 34236
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 tile board of the change.
Anthony Roman, President (Printed or typed name and tida)
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 Sent) If signing on behalf of an entity:
(Typed or Printed Nume)

* * * FILING FEE: 535.00 * * *