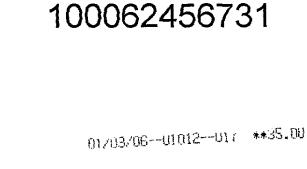
L34626

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	, . (Requestor's Name)
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Certified Copies Certificates of Status		(Business Entity Name)
		(Document Number)
Special Instructions to Filing Officer:	Certified Copies	Certificates of Status
	Special Instructions	to Filing Officer:



SECRETARY OF STATE
DIVISION OF CORPORATIONS

Office Use Only

RA Chg.

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Triad Advisors, Inc. (Name of Corporation)
DOCUMENT NUMBER: L34626
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:
Corey Pugh (Name of Contact Person)
Triad Advisors, Inc. (Firm/Company)
3500 Parkway Lane, Suite #220 (Address)
Norcross, GA 30092 (City/State and Zip Code)
For further information concerning this matter, please call:
Corey Pugh (Name of Contact Person) at (888) 713-8334 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, 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.	
The name of the corporation: Triad Advisors, Inc.	
2. The principal office address: 7491 N. Federal Hwy. , Suite C5-290	
Boca Raton, FL 33487	
3. The mailing address (if different): 3500 Parkway Lane, Suite #220	
Norcross, GA 30092	
4. Date of incorporation/qualification: 12/1/1989 Document number: L34626	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Robert Bruderman	0
5905 S. Congress Ave.	olc I NIG
Atlantis, FL 33462	NISION -3
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	3 PH
David Wentley	-
7491 N. Federal Hwy., Suite C5-290	_
(P.O. Box NOT acceptable)	:
Boca Raton, FL 33487	£
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) Ker ay MA THIS V. P. (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) 12 - 28 - 05	
(Signature of Registered Agent) (Date) If signing on behalf of an entity:	
Triad Advisors, Inc. (Typed or Printed Name)	

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