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SECRETARY OF STATE
ALLANASSEE, FLORIDA

NOV 06 2013

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESTAURANT EQUIPMENT MAINTENANCE CORPORATION

Name of Corporation

DOCUMENT NUMBER: F1000000850

The applicant Statement of Charge of Portational Office/A content for one submitted for filing

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:

Registered Agent Solutions, Inc.
Firm/Company

1701 Directors Blvd. Ste. 300

Address

Austin, TX 78744

clientservices@rasi.com

E-mail address: (to be used for future annual report notification)

City/State and Zip Code

For further information concerning this matter, please call:

Karina Pulskamp
Name of Contact Person

Name of Contact Person

at (888) 705-7274
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

October 29, 2013

VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Restaurant Equipment Maintenance Corporation

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

KARINA PULSKAMP

REGISTERED AGENT SOLUTIONS, INC.

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

statement of change is	tions of sections 607. 4 502, 617.0502, 607.1508, or 617.1508. Florida State is submitted for a corporation organized under the laws of the State of <u>Alat</u> change its registered office or registered agent, or both, in the State of Flor	bama
 The name of the cor The principal office 	rporation: RESTAURANT EQUIPMENT MAINTENANCE Control of the state of th	ORPORATION
3. The mailing address	s (if different):	
4. Date of incorporation	on/qualification: 02/18/2010 Document number: F100000	00850
	et address of the current registered agent and registered office on file with a of State: (If resigned enter resigned)	the
BUS	SINESS SUPPORT INC	
417	7 STOWE AVE, SUITE A	•
OR	ANGE PARK, FL 32073	
6. The name and street (if changed):	et address of the new registered agent (if changed) and /or registered office	13 NOV SECRETA ALLAHA
Reg	gistered Agent \$olutions, Inc.	SSEE -
155	5 Office Plaza Dr. Suite A	PRS PRS
	P.O Box NOT acceptable	024 F:
Tall	lahassee, FL 32301	46 115 104
The street address of as changed will be ide	its registered office and the street address of the business office of its relentical.	egistered agent,
Such change was authorized by the boa	horized by resolution duly adopted by its board of directors or by an offi ard, or the corporation has been notified in writing of the change.	icer so
Richard 7 Signature of an	Richard T. Gory Sr- President Printed or typed name and title	lent
I hereby accept the ap I further agree to com performance of my du	ppointment as registered agent and agree to act in this capacity mply with the provisions of all statutes relative to the proper and compleuties, and I am familiar with and accept the obligation of my position as tument is being filed merely to reflect a change in the registered office a the corporation has been notified in writing of this change.	ete s registered address, I
Signature of Signa	of Registered Agent 10/2013 Date	
avlum Widi	t Asst. Secretary	
Typed/dr	Printed Name	
U U	* * * FILING FEE: \$35.00 * * *	