## M3490

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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ON THE SECRETARY OF STATE

## **COVER LETTER**

Division o	f Corporations			
SUBJECT: R	MF THOROUG	HBREA 5 Name of Corporation	n)	
DOCUMENT NU	мвек: <i>М</i> 3	6490		
The enclosed State	ment of Change of Registe	ered Office/Agent a	and fee are submitted for filing.	
Please return all co	rrespondence concerning	this matter to the fo	llowing:	
	DAVIZ	J BLACK	con)	
	(142	ime of Contact Fers	on)	
GOLDSTEIN ZUGMAN WEINSTEIN & POOLE LLC (Firm/Company)				
		(1 min/Company)		
<u>. 1</u>	4875 N. FEDER	AL HWY	FOURTH FLOOR	
		(Mairess)		
FT. LAUDERDACE, FL 33308 (City/State and Zin Code)				
(City/State and Zip Code)				
For further informa	tion concerning this matte	er, please call:		
DAVID (Na	BLACK me of Contact Person)	at (	954) 351 9000 rea Code & Daytime Telephone Number)	
Enclosed is a \$35.0	00 check made payable to	the Department of S	State.	
	Mailing Address: Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	rations	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

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 FLORIAA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: RMF THOROUGHBRESS, INC.  2. The principal office address: 3966 GARTH ROAD
2. The principal office address: 3966 GARTH ROAD
CROZET, VA 22937
3. The mailing address (if different): 5AME
4. Date of incorporation/qualification: 8-8-86 Document number: M 36 490
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
DAVID BLACK
13450 W. SUNRISE BLUB. SUITE 150  SUNRISE, FL 33323
SUNRISE, FL 33323
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DAVIN BLACK  4875 N. FEDERAL HWY. FOURTH FLOOR  (P.O. Box NOT acceptable)
(P.O. Box NOT acceptable)
FT. LANDERDACE, FC 33308
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 charge 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.
ELIZABETH MARCUS DP (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.
David & Black 11/6/06
(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)