## P08000012185

(Requestor's Name)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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## **COVER LETTER**

Division of Corporations
SUBJECT: RELICLEY (ATTAL CORP.  (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: POBOSOSIUSS
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:
Toyce Rubin (Name of Contact Person)
(ivaline of Confact Person)
Berkley Captal Corp. (Firm/Company)
(Firm/Company)
931 Clint Moore Road (Address)
BOLA RATON, FL 33487 (City/State and Zip Code)
For further information concerning this matter, please call:
Toyce Rubin  (Name of Contact Person)  at (561) 676-6619  (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

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.
1. The name of the corporation: Res Icley Capital Cosp.
2. The principal office address: 931 Clint Moore Road
Boca Raton, FL 30487
3. The mailing address (if different): Sqm2
4. Date of incorporation/qualification: 21200 Document number: P0000012185
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Cloberman, Bally B
16819 Knightsbridge Lane
Deliny Beach, FL 33484 Egg = 7
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
RUBIN, Toxce
16819 Knightsbridge Lane (P.O. Box NOT acceptable)
Delcay Beach, FL, 33484
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.
Mycl Kubi  (Signature of an officer or director)  Suyce Rubin President  (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)  S 27 Log (Date)
If signing on behalf of an entity:
Toyce Rubin (Typed or Printed Name)

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