## P11000053407

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	. <u>.                                   </u>
PICK-UP WAIT	MAIL
(Business Entity Name)	·
(Document Number)	
Certified Copies Certificates of Stat	us
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## **COVER LETTER**

TO: Amendmen Division of	t Section Corporations	•	
SUBJECT:	1919 Ricard Name of C		
DOCUMENT NUM	D444	000053407	
The enclosed Staten	nent of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
		· ·	
	Bill McFari	and, Esq.	
_	Name of Cor	ntact Person	
•	Bill McFar Firm/Co		
	rim/CC	inpany	
	2930 Del Prado Boul	overd South Suite A	
•	Add		
	Cape Coral, F	lorida 33904	
•	City/State ar	d Zip Code	
<del>- ,</del>	E-mail address: (to be used for fi	iture annual report notification)	
For further informat	ion concerning this matter, please c	all:	
	Bill McFarland	at ( 239 ) 549-5680 Area Code & Daytime Telephone Numb	
Nam	e of Contact Person	Area Code & Daytime Telephone Numb	er
Enclosed is a \$35.00	check made payable to the Depart	ment of State.	
	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327	Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

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: 1919 Ricardo Inc.
The principal office address: 2541 N. Tamiami Trail, North Fort Myers, Florida 33903
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/07/2011 Document number: P11000053407
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Robert Wetenhall, Jr.
2541 N. Tamiami Trail
North Fort Myers, Florida 33903
North Fort Myers, Florida 33903  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Bill McFarland, Esq.  2930 Del Prado Boulevard South, Suite A
Bill McFarland, Esq.
2930 Del Prado Boulevard South, Suite A
P.O. Box NOT acceptable  Cape Coral, Florida 33904
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 office or director  Printed or typed name and title
I hereby accept the expointment 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 priting of this change.
160 M Failane 8/29/11
Signature of Registered Agent  If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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