

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000079689 3)))



H150000798893ABCC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007

: (702)866-2500

Fax Number : (702)866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: documents @ incorp. com

REGISTERED AGENT CHANGE RENOVO SOFTWARE INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

COVER LETTER

Division of Con			
SUBJECT:	RENOVO SOFTW/ Name of Cor		
DOCUMENT NUMBE	R: F06000001586		
		Agent and fee are submitted for filing.	
	ondence concerning this matter t	-	
		-	
	Natalie Bal		
	Name of Contr	act Person	
	InCorp Servi	ices, Inc.	
Firm/Company			
2360 Corporate Circle · Suite 400			
Address			
	Henderson, NV City/State and	89074-7739 Zip Code	
	da eu (ma este ©1-		
	documents@in ail address: (to be used for fut	ure annual report notification)	
	•		
For further information	concerning this matter, please ca	11:	
l <u>atalie Bales</u> on	behalf of Incorp Services, Inc Contact Person	at (702) 866-2500 Area Code & Daytime Telephone Number	
I vame of	Contact Person	Area Code & Dayume Telephone Number	
Enclosed is a \$35.00 che	eck made payable to the Departm	nent of State.	
	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations	Division of Corporations	
	P O Box 6327	Clifton Building	

Tallahassee, FL 32314

CR2E045 (03/12)

2661 Executive Center Circle Tallahassee, FL 32301

07:27:45 a.m. 03-31-2015

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

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation organ	nized under the laws of the State of Minnesota
in order to change its registered office or registe	
1. The name of the corporation: RENOVO SOFTWA	RE INC.
2. The principal office address: 5666 LINCOLN DR	SUITE 206
EDINA, MN 55436	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/13/2006	Document number: F06000001586
5. The name and street address of the current registered a Florida Department of State: (If resigned, enter resigned	
CORPORATION SERVICE CON	IPANY
1201 Hays Street	
Tallahassee, FL 32301	<u> </u>
6. The name and street address of the new registered agen (if changed):	
InCorp Services, Inc.	<u> </u>
17888 67th Court North	Tacceptable 2
P.O. Box NOT	acceptable 2
Loxahatchee, FL 33470	
The street address of its registered office and the street as changed will be identical.	
Such change was anthorized by resolution duly adopted authorized by the loans, or the corporation has been not	by its board of directors or by an officer so tified in writing of the change.
Signature of an office of dispeter	Teresa Ridgeway, Secretary
I hereby accept the appointment as registered agent am I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and a agent. Or, if this document is being filed merely to refle hereby confirm that the corporation has been notified in	
Mu M	March 24, 2015
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Natalie Bales on behalf of Incorp Servic	es, Inc.
* * * FILING FE	E: \$35.00 * * *
MAKE CHECKS PAYABLE TO FLO MAIL TO: DIVISION OF CORPORATIONS, P.O CR2E045 (03/12)	RIDA DEPARTMENT OF STATE O. BOX 6327, TALLAHASSEE, FL 32314