

F07000005621

(Requestor's Name)

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TALLAHASSEE FLORIDA

RA Change

FEB 13 2012

T. LEWIS

wrong form

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Riggs, Counselman, Michaels & Downes, Inc.
Name of Corporation

DOCUMENT NUMBER: F07000005621

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:

Megan R. Tucker
Name of Contact Person

Registered Agent Solutions, inc.
Firm/Company

515 Congress Ave Suite 2300
Address

Austin, TX 78701
City/State and Zip Code

CBreneman@rcmd.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Megan Tucker at (888) 705-7274
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2012

COA DEPT- MEGAN TUCKER
REGISTERED AGENT SOLUTIONS, INC.
515 CONGRESS AVENUE, SUITE 2300
AUSTIN, TX 78701

SUBJECT: RIGGS, COUNSELMAN, MICHAELS & DOWNES, INC.
Ref. Number: F07000005621

We have received your document for RIGGS, COUNSELMAN, MICHAELS & DOWNES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 012A00002391

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TALLAHASSEE, FLORIDA

**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 Maryland in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Riggs, Counselman, Michaels & Downes, Inc.
2. The principal office address: 555 Fairmount Avenue Baltimore, MD 21286
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/14/2007 Document number: F07000005621
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)

HIQ Corporate Services, Inc

1574 Village Square Blvd Ste 100

Tallahassee, FL 32309

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agent Solutions, Inc.

155 Office Plaza Dr. Suite A

P.O. Box NOT acceptable

Tallahassee, FL 32301

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 officer or director

Jon Kevin Carnell, COO
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

Feb. 9, 2012
Date

If signing on behalf of an entity:

Art Flores

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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