## F10000003804

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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RAFRO Change

03/10/22--01021--008 \*\*35.00



A. RAMSEY

MAR 24 2022

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: RUBY TREE SOFTWARE, INC. Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER: F10000003804	40.740.75
The enclosed Statement of Change of Registered Off	fice/Agent and fee are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Victoria Padron	
Name of Contact Person	
ZenBusiness Inc.	
Firm/Company	
336 E. College Ave. Suite 301	
Address	<del></del>
Tallahassee, FL 32301	
City/State and Zip Code	<del></del>
fulfillment@zenbusiness.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, pleas	e call:
Victoria Padron	at (844 ) 493-6249  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Dep	artment of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
I ahanassee, rl 32314	2410 N. MONIOC SUCCI, SUIC OIV

Tallahassee, FL 32303

CR2E045 (04/13)

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

-		2, 607.1508, or 617.1508, Florida Statutes, this
	nge is submitted for a corporation organ	
	-	ered agent, or both, in the State of Florida.
1. The name of t	he corporation: RUBY TREE SOFTWAR	RE, INC.
2. The principal	office address: 909 Egrets Landing Way C	Groveland, FL 34736
3. The mailing a	ddress (if different): 15430 County Road	565A V Groveland, FL 34736
4. Date of incorp	oration/qualification: 08/24/2010	Document number: F10000003804
<ol><li>The name and Florida Depar</li></ol>	street address of the current registered a trnent of State: (If resigned, enter resigned	gent and registered office on file with the ed)
	Alexander Abramson, PLLC	
	220 N. Rosalind Ave. First Floor	2 X X
	Orlando, FL 32801	
6. The name and (if changed):	street address of the new registered age	nt (if changed) and /or registered office
	ZenBusiness Inc.	
	336 E. College Ave. Suite 301	
	P.O. Bo	x NOT acceptable
	Tallahassee, FL 32301	
The street addre	ess of its registered office and the street be identical.	address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of directors or by an officer so otified in writing of the change.
14 Crest	on Fulton Jamison AAA	Creston Fulton Jamison III, President
_	re of an officer or director	Printed or typed name and title
of my duties, and document is bei	id Lawi familiar with and accent the Ob.	ligation of my position as registered agent. Or, if this he registered office address, I hereby confirm that the
(Last )	Demis	02-01-2022
Sig	nature of Registered Agent	Date
If signing on be	half of an entity:	
Khadijeh Hemm	ati, Secretary of ZenBusiness Inc.	
T	yped 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 (04/13)