## F18000005579

(Requestor's Name)
(Address)
(100000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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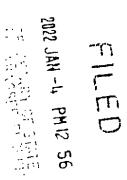
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## **COVER LETTER**

Amendment Section

TO:

Division of Corporations
SUBJECT: RGT Foods Cincinnati, Inc. Name of Corporation
DOCUMENT NUMBER: F1800005579
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:
Kimberly Wimberly Name of Contact Person  RGT Foods Cincinnati Inc.  Firm/Company  Illo MC Davis Blvd Ste allo  Address  Sarta Losa Beach FL 32459  City/State and Zip Code  Kwimberly & ratfords. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kimberly at (901) 7167-1382  Name of Contact Person at (901) 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

## 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
1. The name of the corporation: RGT Foods Cincinnati, Inc.
2. The principal office address: 116 MC Davis Blvd Ste 216 Santa Rosa Beach, F-L 32459
3. The mailing address (if different):
4. Date of incorporation/qualification: 12 5 18 Document number: F1800005579
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)
Corporation Services Company 1201 Hays St Tallahassee, FL 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
66 Flatwoods Forest Loop P.O BOX NOT acceptable Santa Rosa Beach, FL 32459
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 another or director.  Signature of another or director.
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.
If signing on behalf of an entity:    13/8/3    Date
Typed or Printed Name

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