F76198

(Req	uestor's Name)	
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(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	





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10.19.07

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Royce AIR CONDITIONING. INC. (Name of Corporation)
DOCUMENT NUMBER: F76198
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:
Royce Lope 2— (Name of Contact Person) Royce AIR CONDITIONING (Firm/Company) 4594 N. HIATUS RD (Address) LUNRISE FL. 33351 (City/State and Zip Code)
For further information concerning this matter, please call:
Royce Lope Z at (954) 747-9099 (Name of Contact Person) at (954) 747-9099 (Area Code & Daytime Telephone Number)

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FI 33314

Street Address: Amendment Section Division of Corporations Clifton Building

Page Precutive Center Circle Tallahassee, FL 32301

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 ofF_CORIO_/- in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 2. The principal office address: SUNPLSE LL 33351
2. The principal office address: 4594 N. HIATUS RD
SUNDISE IL 33351
3. The mailing address (if different):
4. Date of incorporation/qualification: 04/13/1982 Document number: F76198
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Royce Lopez
SUNRISE H 33351
SUNRISE H 33351
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): ARMANDO LOPEZ
ARMANDO COPEZ ARMANDO COP
4594 N. HIATUS RO
4594 N. HIATUS RD (P.O. Box NOT acceptable) SUNRISE FL 33351
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 of the corporation has been notified in writing of the change.
(Signaphic of an officer or director) Royce Lopez Pres. (Frince or typed name and title)
I hereby accept the appoinment 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 heing 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 Registerul Agekt) (Date)
If signing on behalf of an entity: Signing on behalf of an entity: Significant Significant
HEMANDO COPEZ
(Typed or Printed Narfie)
*** FILING FEE: \$35.00 *** E Seg
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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