

Division of Corporations Public Access System

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Division of Corporations,

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From:

Account Name : BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE

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## REGISTERED AGENT CHANGE

## R. S. ROSAMP INCORPORATED

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation; R.S. Rosamp Incorporated
2. The principal	office address: 1180 Ponce De Leon Boulevard, Suite 201, Clearwater, FL 33756
3. The mailing a	ddress (if different); same
4. Date of incorp	poration/qualification: 5/14/86 Document number: J14188
	I street address of the current registered agent and registered office on file with the treent of State:
	William G. Buckles, Jr.
	1180 Ponce De Leon Boulevard, Ste. 201
	Clearwater, FL 33756
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Greg D. Veltman ™9 ♣ П
	1180 Ponce De Leon Boulevard, Ste. 201
	Clearwater, FL 33756
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
•	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
	Greg D. Veltman  [Printed or typed name and title)
I hereby accept a further agree to of my duties, and document is bette corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
X (Sier	nature of Registered Agent) 9 1 0 (Date)
If signing on bel	- • •
(Т)	yped or Printed Name)
	* * * FILING FEE: \$35.00 * * *
MA	Make checks payable to Florida Department of State all to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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