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(Re	equestor's Name)				
(Address)					
(Address)					
(Ci	ty/State/Zip/Phone #	r)			
PICK-UP	☐ WAIT	MAIL			
(Bi	usiness Entity Name	)			
(De	ocument Number)				
Certified Copies	Certificates o	f Status			
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## **COVER LETTER**

TO:

INHS18 (2/14)

TO: Registration Section Division of Corporations				
SUBJECT:				
Name	e of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
FRANK CONIGLIO				
Name of Person				
E.R. BRADLEY'S, INC.				
Firm/Company				
104 CLEMATIS STREET				
Address				
WEST PALM BEACH, FL 33401				
City/State and Zip Code				
PEREBOOMCPA@MSN.COM				
E-mail address: (to be used for future annu	al report notification)			
For further information concerning this matter, p	please call:			
FRANK CONIGLIO	561 833-3520			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: RITCON PRO	PERTI	ES, LLC	
2. (a)	257 ROYAL POINCIANA WAY	(b) 1139 N OCEAN BLVD.		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(U,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	257 ROYAL POINCIANA WAY		1139 N	DCEAN BLVD.
	PALM BEACH, FL 33480		PALM B	EACH, FL 33480
	3/17/2003		_0300000	9399
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	CHARLES D. BARNETT			
J. (u)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	:
	6412 NATIVE DANCER ROAD			
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		
	6412 NATIVE DANCER ROAD			5
	PALM BEACH GARDENS , FL	33418		
(b)	FRANK CONIGLIO			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	,
	104 CLEMATIS STREET			
	NEW Registered Office Address:			
	104 CLEMATIS STREET			
	WEST PALM BEACH , FL	33401		
the cha agent v was/we the arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia bre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the laws of a markle specific members of the street and th	the regist bility con f the limi limited li	ered office npany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  IGLIO
	ure of a member or authorized representative of a member	4	5. Als.	Printed or typed name of signee
provision the oblination to mere	by accept the appointhent as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided tly reflect a change in the registered office address, I h I in writing of this change.	ee to act performa I for in C ereby co	n this capa nce of my a hapter 605, nfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

**FILING FEE: \$25.00** 

Signature of Registered Agent