#110000067853

(Re	equestor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	 -
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	•
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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13 APR 26 TH 1: 56
SECRETARY OF STATE
SECRET

Office Use Only

K.SALY EXAMINER APR 26 2013 Admin, Dissolution renaved and RA change Filed NIC due to error when filing AR. The system should have notofied a Registered Agent must be designated.

SP7 4/25/13

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: FR TAX GROUP Name of Limited	LLC I Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office (Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Kay Caliendo Name of Person Clo Allerand Capital Firm/Company 675 W Indicator n Dd Address	5.403
Jupiter FL 33458 City/State and ZIp Code	
E-mail address; (to be used for future ampual report notification	on)
For further information concerning this matter, plea	ase call:
Vay Caliendo at (561 354. 6186 Area Code & Daystone Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tailahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount	ount:
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INHSIE (S/DE)	

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: R T.a.	& Group Life.
2. (a) Principal office address of limited liability company (Nate: MUST BE STREET ADDRESS)	G75 W Indiante wn RTC 33
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	30.3
June 25, 2010 3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	National Corporate Research, Ltd., Inc.
Registered Office Address:	155 Office Plaza Drive Tallahassee, Florida 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	
NEW Registered Agent:	Netwood Corporate Research, Ltd., Inc. 135 Office Plaza Drive
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee, Florida 37301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company. It is hereby confirmed that the change(s) the members of the timited liability company or as otherwisthe operating agreement of the limited liability company. Signifure of a familia for multipurized representative of a member	aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or
Prehard T Sabella	-
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this accument is being filed to me agaress, I hereby confirm that the limited liability company	gree to get in this capacity. I further agree to Sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.
Standard of Registered Agent Rose Maris Cole, Asst. 8	Secretary
Division of Corporations, P.O. Box 63	27, Tailahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)