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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations		
SUBJECT: ROT Marketing Solutions Name of Limited 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 matter to the following:		
Luis Daniel Roque Name of Person		
ROI Marketing Solution Firm/Company		
250 N. Orange Ave#610		
Orlando FL 32801 City/State and Zip Code		
L. Roque & HISCapitalaroup. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Luis Daniel Roque at (714) 235 7434 Name of Person at (714) 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		



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

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DEPARTMENT OF STATE OF VISION OF CORPORATIONS
TALLAHASSEE, ELORIDA

June 20, 2014

LUIS DANIEL ROQUE ROI MARKETING SOLUTIONS, LLC 250 N. ORANGE AVE #610 ORLANDO, FL 32801

SUBJECT: ROI MARKETING SOLUTIONS, LLC

Ref. Number: L13000160752

We_have_received_your_document_for_ROLMARKETING_SOLUTIONS,-LLC_and your_check(s)_totaling_\$35:00.) However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 314A00013452

* 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. Name of the limited liability company: Principal office address of limited liability company: Mailing address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 3. Date of filing/registration in Florida (MUST BE FLORIDA STREET ADDRESS) Enter name of NEW Registered Agent and/or NEW Registered Office address: If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Rick Melero, Managing members of signee Signature of a member of authorized representative of a member 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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change Signature of Registered Agent