

N98000000862

Ryzpah
1550 N. Fed Hwy #114
Bayton Bch, FL 33435

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300020678223

(67)FEB--01062--021 **35.00

FILED

03 JUN 16 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T BROWN JUN 23 2003

P A change

**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 of _____
in order to change its registered office or registered agent, or both, in the State
of Florida.

1. The name of the corporation: RIZPAH FAMILY SERVICES, INC.
2. The principal office address: 1550 N. FEDERAL HIGHWAY #14
BOYNTON BEACH, FL 33435
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/12/1998 Document number: N 98 00000062
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
SHIRLEY ROBERTSON
1550 N. FEDERAL HIGHWAY #14
BOYNTON BEACH, FL 33435
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed):
ROMAINE MARTIN SEWEAT
1550 N. FEDERAL HIGHWAY #14
(P.O. Box or personal mailbox NOT acceptable)
BOYNTON BEACH, FL 33435

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, or the corporation has been notified in writing of the change.

Romaine Martin Seweat ROMAINE MARTIN SEWEAT, CHAIRMAN
(Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title)

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 obligation of my position as
registered agent. Or, if this document is being 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.

Romaine Martin Seweat 6/13/03
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

ROMAINE MARTIN SEWEAT CHAIRMAN
(Typed or Printed Name) (Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314