Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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Email Address:

REGISTERED AGENT CHANGE ROSENBLAD DESIGN GROUP, INC.

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COVER LETTER

Division of Corporations
SUBJECT: ROSENBLAD DESIGN GROUP, INC. Name of Corporation
DOCUMENT NUMBER: P00000081723
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Fredrik Thelander
Name of Contact Person
Rosenblad Design Group, Inc.
Firm/Company
86395 Gene Lasserre Boulevard
Address
Yulce, Florida 32097
City/State and Zip Code
fredrik.thelander@rosenbladdesign.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Fredrik Thelander
Name of Contact Person at (904) 225-1095 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, QR. BQTH $_{\rm 3}$ FOR CORPORATIONS

statement of ch	e provisions of sections 607.0502, 617.0 nange is submined for a corporation org fer to change its registered office or reg	anized under the laws of the State of $rac{\mathrm{E}}{}$	LORIDA
1 The name of	the corporation: Rosenblad Design Gre	sup, Inc.	
2. The principa	d office address: 86395 Gene Lasserre B	ouleverd, Yulee, Florida 32097	
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: April 15, 1993	Document number: P0000008	1723
	nd street address of the current registered artinent of State: (If resigned, enter resig		h the
	Arthur J. Jacobs		_
	961687 Gateway Boulevard, Suite 201		20 AUS
	Fernandina Beach, FL 32034);s 20
6. The name an (if changed):	id street address of the new registered at	gent (if changed) and for registered offic	
	Corporation Service Company		
	1201 Hays Street		
	P.O. (Tallahassee, FL 32301	Sux NOT acceptable	
The street addr as changed wil	ess of its registered office and the street be identical.	et address of the business office of its	registered agent,
Such change wantborized by I	as authorized by resolution duly adopt he pourd, or the corporation has been t	ed by its board of directors or by an onotitied in writing of the change.	fficer so
10	A V	Fredrik Thelander President	
-	ire of an afficer or director	Printed or typed name and fille	
l familiaer morbe	the appointment as registered agent of to comply with the provisions of all ste at I am familiar with and accept the of ing filed merely to reflect a change in a s been notified in writing of this chang	states relative to the number and comm	lete performance agent. Or, if this confirm that the
Lanara	b E Alemon	08/20/2020	
	mature of Registered Agent	Date	
If signing on be	thalf of an entity:		
Amanda Robins	sen		
)	yped or Printed Name		
	* * * FILING F	TER - \$35 00 * * *	