

P00000 113222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

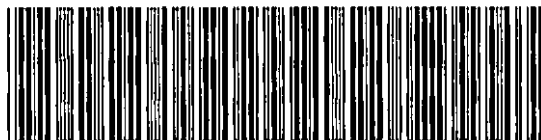
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 12 2019

T SCHROEDER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Roe Agency, Inc.

Name of Corporation

DOCUMENT NUMBER: P00000113222

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:

Matthew S. McRoberts

Name of Contact Person

McRoberts Law, PLLC

Firm/Company

5625 Strand Boulevard, Suite 508

Address

Naples, FL 34110

City/State and Zip Code

mmcroberts@mcrobertstaxlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen Roe

Name of Contact Person

at ( 239 ) 593-7333

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

1. The name of the corporation: Roe Agency, Inc.
2. The principal office address: 5644 Tavilla Circle, Suite 107, Naples, FL 34110
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/5/2000 Document number: P00000113222
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Stephen M. Roe

5644 Tavilla Circle, Suite 107

Naples, FL 34110

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

McRoberts Law, PLLC

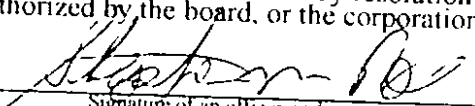
5625 Strand Boulevard, Suite 508

P.O. Box NOT acceptable

Naples, FL 34110

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

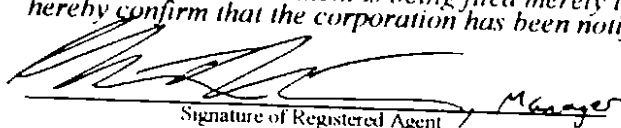
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Stephen M. Roe, President

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.*

  
Signature of Registered Agent

Manager

4/3/19

Date

If signing on behalf of an entity:

Matthew S. McRoberts, Manager

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (03/12)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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