

PO10000063917

SIESKY, PILON & POTTER

a partnership of professional associations

ATTORNEYS AT LAW

SUITE 201, THE FAIRWAY BUILDING
1000 TAMiami TRAIL NORTH
NAPLES, FLORIDA 34102

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Change

TR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Rita Robertson, P.A. (formerly Robertson Realtors, Inc.)
(Name of Corporation)

DOCUMENT NUMBER: P01000063917

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:

James A. Pilon
(Name of Contact Person)

(Firm/Company)

1000 Tamiami Trail North, Suite 201
(Address)

Naples, FL 34102
(City/State and Zip Code)

For further information concerning this matter, please call:

James Pilon at (239) 263-8282, Ext. 303
(Name of Contact Person) (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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 12, 2008

SIESKY, PILON & POTTER
1000 TAMIAMI TRAIL NORTH STE 201
NAPLES, FL 34102

SUBJECT: ROBERTSON REALTORS, INC.
Ref. Number: P01000063917

We have received your document for ROBERTSON REALTORS, INC. 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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 708A00056853

**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: Rita Robertson, P.A. (formerly Robertson Realtors, Inc.)
2. The principal office address: 8601 Via Rapallo, #103
Estero, FL 33928
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/22/2001 Document number: P01000063917
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)

Rita Robertson

3461 Cartwright Court

Bonita Springs, FL 34134

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

Rita Robertson

8601 Via Rapallo, #103

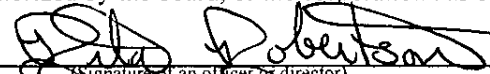
(P.O. Box NOT acceptable)

Estero, FL 33928

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Rita Robertson, 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)

11-19-08
(Date)

If signing on behalf of an entity:

alkfjsaldfj

(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 (8/05)