## P0200094848

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: RICHAM A. CAM, PRIVATE INVESTIGATIONS, INC. (Name of corporation)
DOCUMENT NUMBER: 762000694848
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:
RICHAM A CAM (Name of person)
RICHAN A CAM POLIATS THUESTRATION THE (Name of firm/company)
70 NOX 20136 (Address)
City/state and zip code)
For further information concerning this matter, please call:
(Name of person) at (56/) 257/72/ (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
409 E. Gaines Street
Tallahassee, FL 32399

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

change is submit	provisions of sections 607.0502, 617.0502, tted for a corporation organized under the l istered office or registered agent, or both, i	laws of the State of FLOR	
1. The name of t	he corporation: RICHARD A. CARL	PRIVATE INVESTIGATI	ous, Ivc.
2. The principal	office address: 1601 Forum Po	ACE SUITE 901	
	WPD FE 3340	<u> </u>	- <u></u> -
3. The mailing a	ddress (if different):		
	017100	- Pop.	- 04015
-	oration/qualification: 913102	·	
	street address of the current registered age timent of State:	nt and registered office on file with the	ne
•	RICHAMS A CAM	u	
	2000 N. FLORINA	margo Ro	· ,
	M60 & 33400	: "	TAL 0
6. The name and (if changed):	Street address of the new registered agent of the new regi	+M-	OCT 20 AMIL: 14
The street addre	ess of its registered office and the street acidentical.	dress of the business office of its re	egistered agent, as
Such change wa	s authorized by resolution duly adopted be corporation has been notified in writing	by its board of directors or by an off of the change.	ficer so authorized by
/ /	ignature of an officer or director)	RUFARS A CAN	e and title)
duties, and I am being filed mere	the appointment as registered agent and to comply with the provisions of all statute familiar with and accept the obligation of the registered of writing of this change.	agree to act in this capacity. es relative to the proper and compl of my position as registered agent. fice address, I hereby confirm that t	ete performance of my Or, if this document is the corporation has
	(Signature of Registered Agent)	10-9-0 (Date)	3
		(Date)	
	half of an entity:	PRSSIDES	·
- July	(Typed or Printed Name)	(Capacil	(y)

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