

PO 2000112732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

P. A. Charge
C. COULLIETTE

JUL 15 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CHANGE OF ADDRESS
Name of Corporation

DOCUMENT NUMBER: 04-3718168

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:

RENDELL L. BREWSTER
Name of Contact Person

RLB FINANCIAL SERVICES, INC.
Firm/Company

16115 SW 117 AVE., UNIT A-14
Address

MIAMI, FLORIDA 33177
City/State and Zip Code

rlb_fsi@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RENDELL L. BREWSTER at (305-) 253-8774
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

**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: RLB FINANCIAL SERVICES, INC.
2. The principal office address: 16115 SW 117 AVE., UNIT A-14
MIAMI, FL 33177
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10-18-2002 Document number: P02000112732

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)

18001 OLD CUTLER ROAD, SUITE #311
MIAMI, FL 33157

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

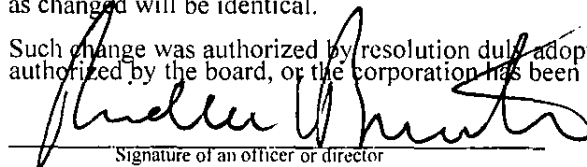
16115 SW 117 AVE., UNIT A-14
MIAMI, FL 33177

P.O. Box NOT acceptable

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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

RENDELL L. BREWSTER
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

7-7-09
Date

If signing on behalf of an entity:

RENDELL L. BREWSTER,
Typed or Printed Name

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