

P03 000 000 272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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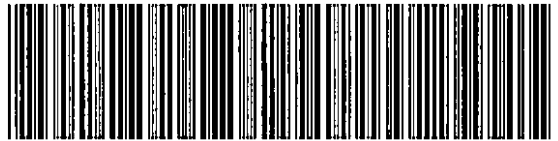
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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OCT 04 2019
C. Klose,

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Rocher Enterprises, Inc.
Name of Corporation

DOCUMENT NUMBER: PO3000000272

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:

Sue L Rocher
Name of Contact Person

Rocher Enterprises, Inc.
Firm/Company

504 NW 89th ST
Address

Gainesville, FL 32607
City/State and Zip Code

suerocher@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sue Rocher at (352) 215-1222
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: Rocher Enterprises, Inc.
2. The principal office address: 504 NW 89th St.
Gainesville, FL 32607
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/1/2003 Document number: P03 000000272
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)

Sue Rocher
7619 SE 79th Lane
Trenton, FL 32693

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

Sue Rocher
504 NW 89th St.
P.O. Box NOT acceptable
Gainesville, FL 32607

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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.

Sue L. Rocher
Signature of an officer or director

Sue L. Rocher, 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.

Sue L. Rocher
Signature of Registered Agent

8/25/2019
Date

If signing on behalf of an entity:

Typed or Printed Name

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