P03000079545

(Requestor's Name)			
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	#)	
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☐ PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	e)	
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(00	cument Number)		
Certified Copies	_ Certificates	of Status	
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Special Instructions to Filing Officer:			

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SEGRETARY OF STATE
TALLAHASSEE FLORINA

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COVER LETTER

TO: Amendment Section Division of Corporation	on rations			
DOVAL AE	DOUTECTUDE & DESIGN	INC		
SUBJECT: ROYAL ARCHITECTURE & DESIGN INC (Name of Corporation)				
DOCUMENT NUMBER	. P03000079545			
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:				
Kenneth A Treadwell				
(Name of Contact Person)				
- · · ·	(Firm/Company	·)		
7240 7t	h Place North			
	(Address)			
West Pa	alm Beach, FL 33411			
(City/State and Zip Code)				
For further information cor	ncerning this matter, please call:			
Kenneth A Treadwell	at (561 798-0901 (Area Code & Daytime Telephone Number)		
(Name of C	Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.				
Ai	ailing Address: mendment Section	Street Address: Amendment Section		
	ivision of Corporations O. Box 6327	Division of Corporations Clifton Building		
	allahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617. ange is submitted for a corporation organized under the laws er to change its registered office or registered agent, or both,	of the State of Florida
1. The name of	the corporation: Royal Architecture & Design Inc	
	office address: 7240 7th Place North	
	Beach, FL 33411 address (if different):	
4. Date of incor	poration/qualification: 07/18/2003 Document nur	mber: P03000079545
	d street address of the current registered agent and registered or rtment of State:	office on file with the
	Kenneth A Treadwell	<u> </u>
	8120 Belvedere Road Suite 3	
	West Palm Beach, FL 33411	ŽV o
6. The name and (if changed):	d street address of the new registered agent (if changed) and /o	or registered office
	7240 7th Place North	FF STA
	(P.O. Box NOT acceptable) West Palm Beach, FL 33411	ATE RIDA
The street address changed will	ess of its registered office and the street address of the busir	ness office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of dir- ne board, or the corporation has been notified in writing of	ectors or by an officer so the change.
/	•	A Treadwell or typed name and little)
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in thi to comply with the provisions of all statutes relative to the part I am familiar with and accept the obligation of my position filed merely to reflect a change in the registered office as been notified in writing of this change.	s capacity. proper and complete performance on as registered agent. Or, if this address, I hereby confirm that the
Lenn	A Treaswell 101	5lo1
(Signing on be	gnature of Registered Agent) chalf of an entity:	(Date)
(1)	Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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