

P04000069622

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RPM EXOTICS, Inc.
Name of Corporation

DOCUMENT NUMBER: PD40000169022

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:

Raja Nalluri M.D.
Name of Contact Person

RPM EXOTICS, Inc.
Firm/Company

2100 S. Tamiami Trl. Ste #200
Address

Sarasota, FL 34239
City/State and Zip Code

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

For further information concerning this matter, please call:

Raja Nalluri M.D. at (941) 370-6500
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

August 11, 2011

RAJA NALLURI, M.D.
2100 S. TAMiami TRAIL
SUITE 200
SARASOTA, FL 34239

SUBJECT: RPM EXOTICS, INC.
Ref. Number: P04000069622

We have received your document for RPM EXOTICS, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

PLEASE LIST THE CORPORATE NAME EXACTLY AS STATED ABOVE IN THIS LETTER.

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) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 211A00018842

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: RPM Exotics, Inc.
2. The principal office address: 2100 S. Tamiami Trl Ste #200
Sarasota, FL 34239
3. The mailing address (if different): same
4. Date of incorporation/qualification: 12/21/07 Document number: P040000069622

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) RIC

Amanda Weaver
2100 S. Tamiami Trl Ste #200
Sarasota, FL 34239

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

Carly Taranto
2100 S. Tamiami Trl. Ste #200
Sarasota, FL 34239

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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]
Signature of an officer or director

Kaia Nailuri MD
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]
Signature of Registered Agent

8/19/11
Date

If signing on behalf of an entity:

Typed or Printed Name

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