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ection orporations		
RSW DEVELOPI	MENT CORP	
BER: P05	000007019	
nt of Change of Registered Offic	e/Agent and fee are submitted	for filing.
spondence concerning this matte	r to the following:	
CYNTHIA Z.	JORGENSEN	
Name of Co	ntact Person	
OLIADI EO A	DDADVIID	
411 E. WISCONSIN A	AVENUE, SUITE 2040	
MILWAUKE	E, WI 53202	
City/State a	nd Zip Code	
mail address: (to be used for t	future annual report notificat	tion)
n concerning this matter, please	call:	
A Z. JORGENSEN	nt (414)	277-5191
	Area Code & Daytime	Telephone Number
heck made payable to the Depar	tment of State.	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327		
	RSW DEVELOPI Name of C BER: P05 Int of Change of Registered Office spondence concerning this matter CYNTHIA Z. Name of Co QUARLES & Firm/C 411 E. WISCONSIN A Add MILWAUKE City/State a mail address: (to be used for the concerning this matter, please A Z. JORGENSEN of Contact Person heck made payable to the Depart Mailing Address: Amendment Section Division of Corporations	RSW DEVELOPMENT CORP Name of Corporation BER: P05000007019 Int of Change of Registered Office/Agent and fee are submitted spondence concerning this matter to the following: CYNTHIA Z. JORGENSEN Name of Contact Person QUARLES & BRADY LLP Firm/Company 411 E. WISCONSIN AVENUE, SUITE 2040 Address MILWAUKEE, WI 53202 City/State and Zip Code mail address: (to be used for future annual report notification concerning this matter, please call: A Z. JORGENSEN of Contact Person at (414) Area Code & Daytime of Contact Person heck made payable to the Department of State. Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations

TO:

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

statement of cha	nge is submitted for a co	rporation organize	607.1508, or 617.1508, Flo ed under the laws of the Stat ed agent, or both, in the Stat	e of Florid	la	
1. The name of	the corporation: RSW	DEVELOPM	ENT CORP			
2. The principal NAPLES,	office address: 63 THC FL 34113	PRNCREST LA	NE			
3. The mailing a	address (if different): P (D BOX 394, NA	PLES FL 34106 US			
4. Date of incorp	poration/qualification:	1/13/2005	Document number:	P0500	0007019	
	I street address of the cur rtment of State: (If resign		nt and registered office on f	ile with the		
	NAPLES-LAWDOO	CK, INC.				
	1395 PANTHER LA	ANE, SUITE 30	00		As =	
	NAPLES, FL 3410	9			ECRE	
6. The name and (if changed):	d street address of the nev	v registered agent ((if changed) and /or register	ed office	RETARY OF	***
	EDWARD M. OLAI	-			Po N	
	63 THORNCREST	LANE		·		
	NAPLES FL 34113	P.O. Box NOT ac	cceptable			
	ess of its registered offic be identical.	e and the street ad	Idress of the business offic by its board of directors or fied in writing of the chang			
5/	re of an officer of director		EDWARD M. OLA	H, PRESI		
I hereby accept I further agree of my duties, an document is bet corporation has	the appointment as reg to comply with the provi ad I am familiar with and ing filed merely to reflec s been notified in writing	istered agent and disions of all statute disions of all statute di accept the oblige t a change in the i g of this change.	agree to act in this capacites relative to the proper an ation of my position as regregistered office address, I	ly. id complete istered agei hereby con	performance nt. Or, if this firm that the	
Sal-1	m Oll		12-22-20,	//		
	mature of Registered Agent		Date			
Ţ	yped or Printed Name					

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