P05000100051

(Requestor's Name)					
(Address)					
(Addi	(OCC)				
(Address)					
(City/	State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Busi	ness Entity Nan	ne)			
,	,	,			
(Doci	ument Number)	,			
Certified Copies Certificates of Status					
Special Instructions to Fi	ling Officer:				
Opecial instructions to 11	mig Onicer.				

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORID

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COVER LETTER

SUBJECT: RICAF	RDO TRANSPORTATION CO.
	Name of Corporation
DOCUMENT NUMBER:	P05000100051
The enclosed Statement of Change	of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
	QUINONES, MANUEL D Name of Contact Person
	Name of Contact Person
R	ICARDO TRANSPORTATION CO.
	Firm/Company
	1726 SNARESBROOK WAY Address
	ORLANDO FL 32837 City/State and Zip Code
ric E-mail address	cardotransportations@yahoo.com s: (to be used for future annual report notification)
For further information concerning	this matter, please call:
QUINONES, MAN	NUEL D at (407) 394-5268 erson Area Code & Daytime Telephone Nur
Name of Contact Pe	erson Area Code & Daytime Telephone Nur

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

statement of cha	nge is submitted for a co	rporation organized	07.1508, or 617.1508, Flor under the laws of the State agent, or both, in the State	of FLORIDA
	he corporation: RICAF office address: 1726 S		ORTATION CO. ORLANDO FL 3283	7
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification:	07/18/2005	Document number:	P05000100051
	street address of the curt trnent of State: (If resigne		and registered office on fil	le with the
	BORJA, YEISON J			
	1726 SNARESBRO	OOK WAY		ALLY SECIE ALLY
	ORLANDO FL 328	37		FIL 16 21 HASS
6. The name and (if changed):	street address of the nev	v registered agent (if	changed) and /or registere	
	QUINONES, MANU	JEL D		ATE ARIDA
	1726 SNARESBRO			
	ORLANDO FL 328	P.O. Box NOT acce	ptable	
The street address changed will	ess of its registered offic be identical.	e and the street add	ress of the business office	of its registered agent,
Such change was authorized by the	as authorized by resoluti ne board, or the corporat	on duly adopted by ion has been notifie	its board of directors or b	by an officer so e.
- Hungignatu	of an officer or director	R	CANDO QUINONES Printed or typed name	e and title
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as regi to comply with the provi d I am familiar with and ng filed merely to reflec been notified in writing	stered agent and ag sions of all statutes I accept the obligat It a change in the re of this change.	ree to act in this capacity relative to the proper and ion of my position as regi gistered office address, I	, d complete performance stered agent. Or, if this hereby confirm that the
<u>, re</u>	nature of Registered Agent	- _	8//2/	109
-	half of an entity:		Dau	
	yped or Printed Name			

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