## P05000122017

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SECRETARY OF STATE ALLAHASSEE. FLORIDA

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R.A.

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## COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: Rodriguez Family Express, Inc  Name of Corporation
	Name of Corporation
DOC	UMENT NUMBER: P05000122017
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Gustavo R. Rodriguez Name of Contact Person
	Name of Contact Leison
	Rodriguez Family Express, INC
	Firm/Company
	4475 Little League Rd
	Address .
	Immokalee, FL 34142
	City/State and Zip Code
	Frabeltl@yahoo.com
	E-mail address: (to be used for future annual report notification)
For fu	orther information concerning this matter, please call:
	Gustavo R. Rodriguez at ( 239 ) 253-6850
	Name of Contact Person Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section  Street Address: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

## 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: Rodriguez Family Express, INC,
2. The principal office address: 1402 Lightner Dr Immokalee FI 34142
3. The mailing address (if different): PO Box 2832 Immokalee, FL 34143
4. Date of incorporation/qualification: 09/05/2005 Document number: P05000122017
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)
Atanasio R. Rodriguez
1402 Lighter Dr Immokalee, FI 34142
Date of resignation: January 18, 2010
6. The name and street address of the new registered agent (if changed) and /or registered office
Gustavo R. Rodriguez  Gustavo R. Rodriguez
4475 Little League Rd
P.O. Box NOT acceptable
Immokalee, FL 34142
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.
Atanasio R. Rodriguez Signature of an officer or director 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.
January 18, 2010 Signature of Registered regint Date
If signing on behalf of an entity:
Gustavo R. Rodriguez Typed or Printed Name

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