Pot000090822

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	·
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		i

Office Use Only



300087064563

KA Chaoge

02/22/07--01021--017 **35.00

O7 FEB 22 AM II: 19
SECHETARY OF STAIL
AND AHASSEE, FLORID

SUFFICIENCY OF FILM

DEPARTMENT OF STATE
STATE OF STATE OF STATE
STATE OF STATE OF STATE
STATE OF STATE O

ASTO1

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Rozar, Inc. (Name of Corporation) DOCUMENT NUMBER: PO6 000090 822	
DOCUMENT NUMBER: _ PO6 000090 822	
The enclosed Statement of Change of Registered Office/Agent and	
Please return all correspondence concerning this matter to the following	-
Avery Rozar (Name of Contact Person	
Rozar, Inc. (Firm/Company)	
6/ Falls Lane (Address)	
Havana, FL 32333 (City/State and Zin Code	
For further information concerning this matter, please call:)
Avery Rozw at (B5 (Area	Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of Sta	te.
Amendment Section A Division of Corporations D P.O. Box 6327 C	treet Address: mendment Section Division of Corporations lifton Building 661 Executive Center Circle

Tallahassee, FL 32301

\$\cdots\$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: Rozar, Inc.
2. The principal office address: 2716 Hastings Dr Tallahnssee, FL 32303
3. The mailing address (if different): 61 Falls lane
Havana, FL 32333 CAR N
4. Date of incorporation/qualification: July 10 7 2006 Document number: P06 5000 8822
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
2500 Merchants Row Blud. P
AP+ 248
Tallahussee, FL 32311
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(P.O. Box NOT acceptable)
- - <u> </u>
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 of an officer or director) (Printed of 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 dities, 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.
2/21/2007
(Signature of Registered Agent) (Daw)
If signing on behalf of an entity:
Rozar, Inc. (Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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