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COVER LETTER

Division of Co	•
SUBJECT:	RODRIGUEZ INVESTMENT ADVISORY, INC. Name of Corporation
	Name of Corporation
DOCUMENT NUME	BER: P07000004854
The enclosed Statemer	nt of Change of Registered Office/Agent and fee are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
	Eric Podicious
	Name of Contact Person
	RODRIGUEZ INVESTMENT ADVISORY, INC. Firm/Company
	Firm/Company
	1824 N. CRYSTA'L LAKE DR (LUTGENT) Address
	Address
	City/State and Zip Code
	City/State and Zip Code
	ERODRIGUEZ @ THOMAS FINANCIAL, COM
E-	mail address: (to be used for future annual report notification)
PRINCIPAL ADDRE	iss , mailing address and address of tradistered abeat has chang
For further information	n concerning this matter, please call:
Fr. t	2-0816152 CT88
Name o	at (813) 843 - 5388 Of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 c	heck 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

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

statement of char	provisions of sections nge is submitted for a r to change its registe	corporation	organized u	nder the law	vs of the State	of FLOR	
1. The name of the	he corporation:	RODRIGI	165 IN	véstmen	T ADVISO	ory, INC.	
2. The principal	office address:	2716 W	EVIELAND	HE16HTS	BLVD		(NEW)
		LAKELA	NO FL	3389	3		
3. The mailing ac	ddress (if different):_	2716	CLEVELA	ND HE	6HTS BUIL	> ((NEW)
		LAKE	LAND FI	<u>. 3380</u> :	3		
4. Date of incorp	ooration/qualification:	1/11/200	7	Document n	number: Po	7000049	354
	street address of the ottment of State: (If resi	_		nd registere	d office on fil	le with the	
		ERIL P	00R16UE	<u> </u>			
	1824	N. CR	4STAL L	AKE DR	-		
	(DAK	ELAND	FL 33	801			>
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Lic RoDizi6052 (UNCHANCED)							
	771		IELAND			COKW	Note the Reserve
			Box NOT accept				
		AKELAND	FL	33803_			
The street addre	ess of its registered of be identical.	fice and the	street addre	ss of the bu	siness office	of its registe	ered agent,
	as authorized by resolute board, or the corpo						
Signatur	re of an officer or director	·	_ 	ERIC	RODE16UE	z - Un	enter/REGISTERED AMENT
· ·	the appointment as r to comply with the pr d I am familiar with ng filed merely to ref been notified in writ	egistered as ovisions of and accept lect a chang ing of this c	gent and agr all statutes r the obligatio ge in the reg change.				erformance Or, if this rm that the
Sign	nature of Registered Agent		-		S 27 1	1	- Walter and the second second
If signing on bel	half of an entity:						
- Fr. C. T.	POP 60EZ-		-				
		* * * FILI	NG FEE: \$3	55.00 * * *			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (8/05)