PM00015089

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(Requestor's Name)					
(Ad	(Address)				
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(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
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Certified Coples	Certificates	of Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations	. 					
SUBJECT: Rick Odle, Inc. (Name of Corporate	tion)					
DOCUMENT NUMBER: P07000015089	· · · · · · · · _ · ·					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Matthew S. Taylor						
(Name of Contact P	erson)					
Marthew S. Taylor, P.A.						
(Firm/Company						
13077 164th Court Nort	th .					
(Address)						
Jupiter, FL 33478						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Mart Taylor at ((Name of Contact Person)	561) 743–1505 (Area Code & Daytime Telephone Number)					
Enclosed is a \$35.00 check 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

-	-		02, 607.1508, or 617.1508, . nized under the laws of the S	
in order to	7- 7-		ered agent, or both, in the S	State of Florida.
1. The name of the o		Rick Odle,		10 B 1
2. The principal offi	ce address: 212	? Spyglass la	ne, Jupiter, Flori	da 334775 E
3. The mailing addre	ess (if different):_	Same		SSZ PP
 	· · · · · · · · · · · · · · · · · · ·			700 5
4. Date of incorpora	tion/qualification	:	Document number:	P0700001\$889 3
5. The name and stree Florida Departme	eet address of the	current registered a	agent and registered office of	on file with the
<u> </u>	3732 N.	W. 16th Stree	et .	16
	Fort La	uderdale, FL	33311	
(if changed):	Richard	<u> </u>	}	
	212 Spy	glass Lane (P.O. Box NOT acceptabl		
		, FL 33477		
	of its registered c	office and the stree	f	ffice of its registered agent,
The state of the s	Company of the compan	· -		
(Signature o	r an otticer or director)		Richard Odle	, President d name and title)
I hereby accept the I further agree to coof my duties, and I document is being corporation has be	appointment as comply with the p an familiar with filed merely to reen notified in wr	registered agent a rovisions of all sta and accept the ob flect a change in t iting of this chang	ind agree to act in this cap stutes relative to the prope pligation of my position as the registered office addres e.	acity. r and complete performance registered agent. Or, if this ss, I hereby confirm that the
Melle	ella_	: 	2/14/0	7
(Signati	ure of Registered Agent	,	(Da	ite)
If signing on behal	f of an entity:			
Richard Odle	<u>,</u>			
(Type	d or Printed Name)	· · · · · · · · · · · · · · · · · · ·	• •	- ·

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