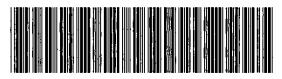
## P0800018495

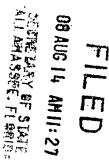
(Re	questor's Name)	
(Ad	dress)	<u> </u>
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(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<del> </del>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Orava Enterprise, Inc. (Name of Corporati	ion)
•	•
DOCUMENT NUMBER: P08000018495	
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.
Please return all correspondence concerning this matter to the f	following:
Yan Trojak	
(Name of Contact Pe	rson)
Orava Enterprise, Inc. (Firm/Company)	
(Firm/Company)	)
7156 San Jose Loop	
(Address)	
N D . D. I. D. A. C.	
New Port Richey, FL 34655 (City/State and Zip C	(ada)
•	ode)
For further information concerning this matter, please call:	
Yan Trojak at ( 7	727 ) 645-6497
Yan Trojak at ( 7	Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of	State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Orava Enterprise , Inc.
	office address: 7156 San Jose Loop, New Port Richey, FL 34655
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 2/20/08 Document number: P08000018495
	street address of the current registered agent and registered office on file with the trnent of State:
	USA-RA, LLC
	841 Prudential Dr., 12th Floor, Jacksonville, FL 32207
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office  Yan Trojak
	7156 San Jose Loop
	(P.O. Box NOT acceptable)  New Port Richey, FL 34655
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
(Signation	Yan Trojak, President  The appointment as registered agent and agree to act in this capacity.  The provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of mis change.
Was a	gnature of Registreed Agents  chalf of an entity:
	Typed or Printed Name)

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