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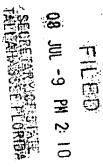
(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
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## **COVER LETTER**

Division of Corporations
SUBJECT: RIMS LEGEND INC (Name of Corporation)
(Many of Darparanon)
DOCUMENT NUMBER: P08000042111
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:
YANIV ZAHAVI
(Name of Contact Person)
RIMS LEGEND INC.
(Firm/Company)
1621 N STATE RD 7
(Address)
LAUDERHILL FL 33313
(City/State and Zip Code)
For further information concerning this matter, please call:
Variety Jahani at (454) 382 - 8262 (Area Code & Daytime Telephone Number)
(Traine of Commet 1 alson) (Then Code to Dayline (elephone (vinitoti)
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

CR2E045 (8/05)

TO:

Amendment Section

on alle wides 6000707400 00:01 88877777

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

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organiz er to change its registered office or register	ed under the laws of the State of FLC	RIDA		
1. The name of	the corporation: RIMS LEGEND INC.				
	office address: 1621 N STATE ROAD 7  LL FL 33313			····	
3. The mailing	address (if different):				
4. Date of incor	poration/qualification: 04-25-2008	Document number: P080000421	11		
	d street address of the current registered ag rument of State:	ent and registered office on file with th	ıe		
	AHARON BITTON		<b>31</b> , 1	_	
	2601 NW 104 COURT, SUITE B		Sie	(B)	
	MIAMI FL 33172				ij
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			RY AR SI	-9 PH 2:	
	YANIV ZAHAVI			= 0	
	1621 N STATE ROAD 7			<u> </u>	
	(P.O. Box NOT acceptable)	· · · · · · · · · · · · · · · · · · ·			
	LAUDERHILL FL 33313				
The street addr as changed wil	ess of its registered office and the street a libe identical.	ddress of the business office of its re	gistered	agent,	
Such change wanthorized by t	as authorized by resolution duly adopted he board, or the corporation has been not	hy its board of directors or by an off ified in writing of the change.	icer so		
X 50	in the	YANIV ZAHAVI			
I hereby accept I further agree of my duties, at document is be	we of an titica or director)  I the appointment as registered agent and to comply with the provisions of all statu ad I am familiar with and accept the oblig ing filed merely to reflect a change in the s been notified in writing of this change.	tes relative to the proper and comple	te perfor	mance if this tat the	<b>;</b>
X 7	gnature of Registered Agent)	y 07-06-	08		
If signing on b	chalf of an entity:				
RIMS LEGEN	·				
	Typed or Printed Name)				
	* * * FILING FE	E: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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