

PO8000062911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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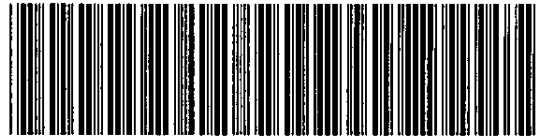
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RJM Custom Homes, Inc

(Name of Corporation)

DOCUMENT NUMBER: P 08000062911

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:

Kimberly Bunner

(Name of Contact Person)

RJM Custom Homes, Inc

(Firm/Company)

2092 SE Hanford Road

(Address)

Port St Lucie, FL 34952

(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberly Bunner

(Name of Contact Person)

at (561) 261-2646

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2008

KIMBERLY BUNNER
RJM CUSTOM HOMES, INC
2092 SE HANFORD RD.
PORT ST. LUCIE, FL 34952

SUBJECT: RJM CUSTOM HOMES, INC.
Ref. Number: P08000062911

We have received your document for RJM CUSTOM HOMES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Michelle Milligan
Document Specialist Supervisor

Letter Number: 508A00052506

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

Pursuant to the provisions of sections 607.0507, 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: RJM Custom Homes, Inc
2. The principal office address: 2092 SE Hanford Road, Port St Lucie, FL 34952
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: June 30, 2008 Document number: P 08000062911
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Ronald Maggio

15340 Meadow Wood Drive

Wellington, FL 33414

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Kimberly Bunner

2092 SE Hanford Road, Port St Lucie, FL 34952

(P.O. Box NOT acceptable)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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]
(Signature of an officer or director)

Kim Bunner
(Printed or 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 duties, 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.

[Signature]
(Signature of Registered Agent)

9/24/08
(Date)

If signing on behalf of an entity:

Ronald Maggio Kimberly Bunner
(Typed or Printed Name)

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

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