P-08000109412

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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N 12-7-11

COVER LETTER

SUBJECT:_	ROS TAY	Name of Corporation
DOCUMEN	T NUMBER:	708000109412
The enclosed	d Statement of Change	of Registered Office/Agent and fee are submitted for filing
Please return	all correspondence co	oncerning this matter to the following:
	<u>Au</u> i	Name of Contact Person
	Ros	TAX SERVICES, INC.
	17673	SW 140 COURT, Address
	MIAMI	FL 33177 City/State and Zip Code
	alina	S ROS TAYSERVICES. COM s: (to be used for future annual report notification)

Enclosed is a \$35.00 check made payable to the Department of State.

For further information concerning this matter, please call:

Name of Contact Person

Amendment Section Division of Corporations

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Gorporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Area Code & Daytime Telephone Number

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

Pursiunt to the provisions of sections 607.0502, 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 FLOLIDA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ROS TAY SERVICES INC
2. The principal office address: 17673 SW 140 COURT, Miami, FL 33177
3. The mailing address (if different):
4. Date of incorporation/qualification: 12.18.2008 Document number: PØ8ØØØIØ9412
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
ALINA BERROS
10301 US HWY 27, UNIT 70,
CLERMONT, FL 34711
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
AUNA BEEROS PE E TO
17473 SW 140 COURT,
P.O. Box NOT acceptable Minni, Ft 33177
The street address of its registered office and the street address of the business office of its registered 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 of an officer or director AUNA BERROS PRESIDENT 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.
10.24.2011
Signature of Registered Agent Date
If signing on behalf of an entity:
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
CR2E045 (8/05)