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R. WHITE

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: REX BUILDING, INC

Name of Corporation

DOCUMENT NUMBER:

P10000054681

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:

EDWARD P. LUDOVICI

Name of Contact Person

LUDOVICI & LUDOVICI, PA

Firm/Company

9000 SW 152 STREET, SUITE 106

Address

PALMETTO BAY, FL 33157

City/State and Zip Code

alex@ludovici-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDWARD P. LUDOVICI

.,305

235-8720

Name of Contact Person

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

statement of cha	ange is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Storganized under the laws of the State of $\frac{F}{F}$	LORIDA	
		registered agent, or both, in the State of Flo	orida.	
1. The name of	the corporation: REX BUILDIN	G, INC.		
	office address: 9000 SW 152 TO BAY, FL 33157	STREET, SUITE 106		
3. The mailing a	address (if different): SAME			
4. Date of incor	poration/qualification: 06/28/10	Document number: P10000	054681	
5. The name and		ered agent and registered office on file with		
	EDWARD P. LUDOVICI			
	17415 SOUTH DIXIE HIG	SHWAY		
	PALMETTO BAY, FL 33	157	16 0	
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered offic	e 25	French 11 (1)
	SAME			
9000 SW 152 STREET, SUITE 106			္ႏုံး မွာ ႏႏೄင္မ	` ' .
	PALMETTO BAY, FL 33	x NOT acceptable	•	
The street addre	ess of its registered office and the s	treet address of the business office of its i	registered agent,	
-		opted by its board of directors or by an of en notified in writing of the change.		
Calun	ud I Jude	' EDWARD P. LUDOVICI, PR	RESIDENT	
I hereby accept	t the appointment as registered age to comply with the provisions of all f my duties, and I am familiar with his document is being filed merely to that the corporation has been noti	Printed or typed name and title nt and agree to act in this capacity. I statutes relative to the proper and compl and accept the obligation of my position a o reflect a change in the registered office fied in writing of this change.	lete 1s registered address, I	
College	gnature of Registered Agent	10/20/16		
If signing on be	chalf of an entity:			
EDWARD I	P. LUDOVICI			
Т	Typed or Printed Name			

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

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