P1000008542

(Re	questor's Name)				
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FEB 1 4 2012 T. LEWIS

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: ROBERTSON GLOBAL	ENTERPRISES, INC.						
Name of Corporation							
DOCUMENT NUMBER: P10	000088542						
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.	•					
Please return all correspondence concerning this matter	er to the following:						
Wendy Rea							
Name of Contact Person							
NRAI Services, Inc.							
Finn/Company							
1160 0College Blvd, Suite 210							
Address							
Overland Park, KS 66210 City/State and Zip Code							
City/State and Zip Code							
info@nrai.com E-mail address: (to be used for future annual report notification)							
E-man address. (to be used for i	ruture aimuar report nouncation)						
For further information concerning this matter, please	call:						
Wendy Rea	at (800) 550-6724						
Name of Contact Person	Area Code & Daytime Telephone Numb	ег					
Enclosed is a \$35.00 check made payable to the Depart	rtment of State.						
Mailing Address: Amendment Section	Street Address: Amendment Section						
Division of Corporations	Division of Corporations						
P.O. Box 6327	Clifton Building						
Taliahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301						

CR2E045 (8/05)



National Registered Agents, Inc. 11600 College Boulevard Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

February 9, 2012

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Robertson Global Enterprises, Inc.

Dear Sir/Madam,

For the purposes of changing the registered office and/or registered agent of the above Robertson Global Enterprises, Inc.

Please find the enclosed original Certificate of Change of Registered Agent accompanied by our check in the amount of Amount of \$35.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Regards

Wendy D. Rea

National Registered Agents, Inc.

Enclosure - Check

PECENTED
2 FEB 13 AM 9: 3

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

statement of cha	inge is submitted for a co	orporation organize	507.1508, or 617.1508, Flo d under the laws of the Sta	re of Florida
		. ,	d agent, or both, in the Sta	•
	•		BAL ENTERPRIS	ES, INC.
= -	office address: 4469 E FA FL 34235	DINBRIDGE CI	RULE	
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification:	10/27/2010	Document number:	P10000088542
	street address of the cur tment of State: (If resign		t and registered office on f	ile with the
	CORPORATION S	ERVICE COMP	PANY	
	1201 HAYS STRE	ET		THE TENT
	TALLAHASSEE FL	32301-2525		B 13
6. The name and (if changed):	street address of the nev	v registered agent (ì	f changed) and /or register	12 FEB 13 PM 1: 33
	NRAI Services, Ir	nc.		33
	515 East Park Ave	P.O. Box NOT acc		
	Tallahassee, FL 32		epartie	
The street addre	ss of its registered office be identical.	e and the street add	ress of the business office	e of its registered agent,
Such change wa authorized by th	s authorized by resoluti e board, or the corporat	on duly adopted by ion has been notific	its board of directors or ad in writing of the chang	by an officer so e.
For you	For an officer or durector	<u> </u>	Faye A. Roberts Printed or typed name	on, President
I further agree to of my duties, and document is bein corporation has NRAI Service hv:	o comply with the provi. I I am familiar with ana ig filed merely tomeflect been notified integriting	stered agent and a sions of all statutes adcept the obligat a change in the re of this change.	gree to act in this capacity relative to the proper an ion of my position as reging is tered office address. The state of the proper is the state of the proper in the state of the property o	y, d complete performance istered agent. Or, if this hereby confirm that the
If signing on beh	,			
	Rea, Assistant Secr	et ary		
Tyj	ped or Printed Name			

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