

P11000023103

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : HISPANUSA INC
Account Number : 120070000099
Phone : (954) 478-2706
Fax Number : (954) 934-0334

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT CHANGE
ROO SERVICES INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ROO SERVICES INC
Name of Corporation

DOCUMENT NUMBER: P11000023103

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:

RODRIGO ORTEGON
Name of Contact Person

ROO SERVICES INC
Firm/Company

157 LAKE HARBOR DRIVE
Address

PALM SPRING FLORIDA 33461
City/State and Zip Code

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

For further information concerning this matter, please call:

RODRIGO ORTEGON at (954) 2571312
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**

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

1. The name of the corporation: ROO SERVICES INC
2. The principal office address: 157 LAKE HARBOR CIRCLE
PALM SPRING, FL 33461
3. The mailing address (if different): P.O. BOX 17241
WEST PALM BEACH, FL 33415
4. Date of incorporation/qualification: 03/07/2011 Document number: P11000023103
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)

RODRIGO ORTEGON157 LAKE HARBOR CIRCLEPALM SPRING, FL 33461

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

ALEXANDER ORTEGON157 LAKE HARBOR CIRCLEP.O. Box NOT acceptablePALM SPRING, FL 33461

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.

Alexander OrtegonSignature of an officer or directorAlexander OrtegonPrinted 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.

Alexander OrtegonSignature of Registered Agent11-10-11Date

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

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