

P11000040925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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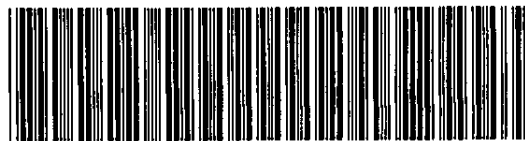
(Business Entity Name)

(Document Number)

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APR 18 2018

FILED

18 APR 17 AM 10:19

RIA-CH



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 7, 2018

BRIAN BURKO  
R.M.S. RETAIL COMMUNICATIONS FLORIDA, IN  
1744 WILLIAM SUITE 400  
MONTREAL, QC H3J1R4,

SUBJECT: R.M.S. RETAIL COMMUNICATIONS FLORIDA, INC.  
Ref. Number: P11000040925

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The designation of the registered agent must be at a Florida street address.

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 818A00004602

RECEIVED  
18 APR 17 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RMS Retail Communications FL Inc  
Name of Corporation

**DOCUMENT NUMBER:** P11000040925

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:

**Brian Burko**

Name of Contact Person

**RMS Retail Communications FL In**

Firm/Company

**1744 William suite 400**

Address

**Montreal, QC H3J1R4**

City/State and Zip Code

**brian@retailcommunications.ca** ✓

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

For further information concerning this matter, please call:

**Brian Burko**

Name of Contact Person

**514 616-1960**

at ( ) 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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: RMS, Retail Communications Florida, Inc.
2. The principal office address: 3180 South Ocean Drive #901, Hallandale, FL 33009
3. The mailing address (if different): 1744 William suite 400, Montreal, QC, Canada H4M1C5
4. Date of incorporation/qualification: 04/27/11 Document number: P11000040925
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)

FEINBERG, JEFFREY

4000 HOLLYWOOD BLVD SUITE 350-N

HOLLYWOOD, FL 33021

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

Steve Greenbaum

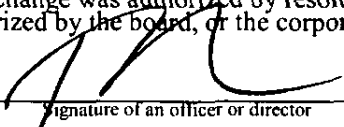
6550 NW 43rd St.

P.O. Box NOT acceptable

Coral Springs, FL, USA, 33067

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 of an officer or director

Brian Burko (Director)

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 of Registered Agent

April 9, 2018

Date

If signing on behalf of an entity:

R.M.S. Retail Communications Florida Inc.

Typed or Printed Name

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