(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Robert S. Rabirts give Authorization by Phone to Update current registered agent info. DC 10/4

Office Use Only



400251821774

09/25/13--01008--009 **35.00

OCT 18 2013 T. CARTER

COVER LETTER

TO:

Amendment Section Division of Corporations

Rabits & Romano Architecture, Inc.

Name of Corporation

P12000039519

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:

Robert S. Rabits

Name of Contact Person

Rabits & Romano Architecture, Inc.

Firm/Company

5127 S. Orange Ave. Suite 110

Address

Orlando - FI - 32809

City/State and Zip Code

bob@rabits-architect.com

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

For further information concerning this matter, please call:

Robert S. Rabits

Name of Contact Person

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: Rabits & Romano Architecture, Inc
2. The principal office address: 5127 S. Orange Ave. Suite 110 - Orlando - Florida - 32809
3. The mailing address (if different): same as above
4. Date of incorporation/qualification: 04/27/2012 Document number: P12000039519
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)
Spiegel 4 14 14 14 16 17 18 40 Sw 20 25 4 14 14 16 16 18 18 18 18 18 18 18 18 18 18 18 18 18
Orlando, Florida, 32809
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. Robert S. Rabits - 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.
Signature of Registered Agent Date If signing on behalf of an entity:
Typed or Printed Name

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