

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tracie Ruffolo PA
Name of Corporation

DOCUMENT NUMBER: P13000000559

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:

Tracie Ruffolo
Name of Contact Person

Firm/Company

23210 Brouwertown Rd.
Address

Howey-In-The-Hills, FL 34737
City/State and Zip Code

Tracie.Ruffolo@gmail.com ✓
E-mail address: (to be used for future annual report notification)

FILED
13 NOV -5 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Tracie Ruffolo at (321) 287-9123
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 14, 2013

TRACIE RUFFOLO
23210 BROUWERTOWN ROAD
HOWEY-IN-THE-HILLS, FL 34737

SUBJECT: TRACIE RUFFOLO, PA
Ref. Number: P13000000559

We have received your document for TRACIE RUFFOLO, PA and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is an additional \$10.00 filing fee due.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 413A00024061

RECEIVED

13 NOV -5 AM 9:01

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: Tracie Ruffolo PA
- 2. The principal office address: 23210 Brouwertown Rd.
Howey-In-The-Hills, FL 34737
- 3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1/3/2013 Document number: P13000000559

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)

Corporation Service Company
1201 Hays St.
Tallahassee, FL 32301

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

Tracie Ruffolo
23210 Brouwertown Rd.
P.O. Box NOT acceptable
Howey-In-The-Hills, FL 34737

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TALLAHASSEE, FL 32301

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.

Tracie Ruffolo
Signature of an officer or director

Tracie Ruffolo, 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.

Tracie Ruffolo
Signature of Registered Agent

10/29/13
Date

If signing on behalf of an entity:

Typed or Printed Name

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