P15 0000 68674

(R	Requestor's Name)			
(A)	ddress)			
(A	(ddress)			
(C	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Name)			
(Document Number)				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 5, 2020

LESLIE GIEGER 2 N 9TH STREET NOBLESVILLE, IN 46060

SUBJECT: RJP REAL ESTATE HOLDINGS, INC.

Ref. Number: P15000068874

We have received your document for RUF FIEAL ESTATE HOLDINGS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must such at papting the designation.

Please return your decument, 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.

Octavia L Simmons Regulatory Specialist II Supervisor

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Letter Number: 520A00011163

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: RIP REAL ESTATE HOLDINGS, INC. Name of Corporation
Name of Corporation
DOCUMENT NUMBER: P15000068674
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:
LESLIE M. GIEGER
Name of Contact Person
CHURCH CHURCH HITTLE + ANTRIM
Firm/Company
2 N 9TH STREET
Address
NOBLESVILLE, IN 46060
City/State and Zip Code
LGIEGER@CCHALAW.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LESLIE M. GIEGER at (317) 773-2190
Name of Contact Person at (317) 773-2190 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	nge is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Stat mized under the laws of the State of $\overline{ ext{FLC}}$	ORIDA	
in order	r to change its registered office or regis	tered agent, or both, in the State of Flor	rida.	
1. The name of t	he corporation: RJP REAL ESTATE HC	OLDINGS, INC.	<u> </u>	
2. The principal	office address: 9333 N MERIDIAN STR	EET, STE 230, INDIANAPOLIS, IN 4626	50	
3. The mailing a	ddress (if different):		.,	
4. Date of incorp	rporation/qualification: 08/11/2015 Document number: P15000068674			
	street address of the current registered tment of State: (If resigned, enter resign	agent and registered office on file with t aed)		
	C T CORPORATION SYSTEM		023	
	1200 SOUTH PINE ISLAND ROAD		2023 JUH 18	
	PLANTATION, FL 33324			
6. The name and (if changed):	street address of the new registered age	ent (if changed) and /or registered office	AHH: 12	
	InCorp Services, Inc.		10	
	17888 67th Court North			
	P.O. Bo	ox NOT acceptable		
	Loxahatchee, FL 33470			
The street address changed will	ss of its registered office and the street be identical.	t address of the business office of its re	gistered agent,	
Such change wa authorized by th	s authorized by resolution duly adopte board, or the corporation has been no	ed by its board of directors or by an off otified in writing of the change.	icer so	
and I		ROBERT J. PASQUESI, PRESIDENT	Γ	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	e of an officer or director	Printed or typed name and title		
l herebblaccept i l further agree to of my duties, and document is bein corporation has	the appointment as registered agent ar o comply with the provisions of all stat d I am familiar with and accept the ob- ng filed merely to reflect a change in the been notified in writing of this change	nd agree to act in this capacity. tutes relative to the proper and comple ligation of my position as registered ag he registered office address, I hereby c ?.	te performance zent. Or, if this onfirm that the	
Variosa) Magil	05/12/2020		
Sign	ature of Registered Agent	Date		
If signing on bel	nalf of an entity:			
	on behalf of InCorp Services, Inc.			

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

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)