P25248

(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:			

Office Use Only



900352185459

09/17/20--01014--018 **35.00



JQ 10/21/20



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: September 15, 2020

Order#: 419203-004

Re: ROSENTHAL WINE MERCHANT (NY), LTD.

Enclosed please find:

XX Change of Registered Agent and Office.

 \underline{XX} Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

	•	617.0502, 607.1508, or 617.1508, Florida Statutes, this
		on organized under the laws of the State of NY
		or registered agent, or both, in the State of Florida.
1. The name of	the corporation: ROSENTHAL W	/INE MERCHANT (NY), LTD. INCORPORATED
	office address: 5643 58TH ST,	
3. The mailing a	ddress (if different): 1219 ROUT	TE 83, PINE PLAINS, NY 12567
	poration/qualification: 07/14/19	
	I street address of the current reg tment of State: (If resigned, ente	ristered agent and registered office on file with the er resigned)
	United Corporate Services, In	.c
	9200 South Dadeland Blvd. S	uite-508
	Miami, FL 33156	
6. The name and (if changed):	l street address of the new registr	ered agent (if changed) and /or registered office
	Corporation Service Company	<u> </u>
	1201 Hays Street	
P.O. Box NOT acceptable		
	Tallahassee	FL 32301
The street address changed will	ss of its registered office and the identical.	ne street address of the business office of its registered agent,
Such change we authorized by the	s authorized by resolution duly be board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Mul	the same of the sa	Mark Hogan, Authorized Person
-	of serofficer or director	Printed or typed name and title
I hereby accept I further agree to of my duties, an accument is bein corporation has Corporation	the appointment as registered a comply with the provisions of a lam familiar with and accept filed merely to reflect a chan been notified in writing of this a Service Company	ngent and agree to act in this capacity. I all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or if this age in the registered office address, I hereby confirm that the change.
By: Yhour	Kuble	09/11/2020
Sign	uture of Registered Agent	Date
If signing on be	nalf of an entity:	
Grace E. Kirby,	Asst. Vice President	
Ty	ped 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
CR2E045 (04/13)