rage I of I

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H0800009013 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

Prom:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Pax Number

: (850)878-5926

REGISTERED AGENT CHANGE

ROAN, LTD., CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

PAGE 01/02

CI CORP

9194222098

01/11/5008 12:35

1/11/2008

FILED

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

this statement of	provisions of sections 607.0302, 617. change is submitted for a corporation	organized under the laws of the State	of ·
Illinois of Florida.	in order to change its registered	l office or registered agent, or both, it	i the dime
_	ne corporation: ROAN, LTD., CORPOR	ATION	_
	office address: 6330 W 14TH ST		
z. The principal (***	200
	BRADENTON FL 34200		<u> </u>
3. The mailing ac	ddress (if different): 4 CHESTNUT		2 = 1
·	LEMONT IL 60439	US	38
4. Date of incorp	oration/qualification: 09/17/1992	Document number: P40522	Fig
	street address of the current registered		ORIDA ORIDA
· -	QUINLAN,	OHN	
	233 15TH STRE	ET WEST	
	BRADENTON	PL 34205	
6. The name and changed):	d street address of the new registered	agent (if changed) and /or registered	d office (i
	C T Corporation	n System	
	c/o C T Corporat	· · · · · · · · · · · · · · · · · · ·	
·	(P.O. Box or personal mailbo		
, 	1200 South Pine Island Road, I		
The street addre	ss of its registered office and the street of will be identical.	address of the business office of its	registered
Such change wa authorized by th	s authorized by resolution duly adopt to board, of the corporation has been r	ed by its board of directors or by an o notified in writing of the change.	fficer so
(Signature of an officer,	chairman or vice chairman or the board)	Ricarda Rashinski, Secre (Printed or typed name and title)	atary
performance of tregistered agent office address, I	the appointment as registered agent of comply with the provisions of all stand duties, and I am familiar with and t. Or, if this document is being filed a hereby confirm that the corporation	accept the obligation of my position nerely to reflect a change in the regis	as tered
By: Br.	. h	1/11/20058	
(Si	gnature of Registered Agent)	(Dute)	
If signing an behalt	f of an entry: lette McNamara	•	
	tanic Secretary	(Capacity)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FLUG - 10/14/03 CT System Online