

P95000002472

(Requestor's Name)

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DIVISION OF CORPORATIONS
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R.A.

JUN 25 2012

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Roico, Inc
Name of Corporation

DOCUMENT NUMBER: P 9500000 2472

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:

Avi Bittan
Name of Contact Person

Roico, Inc
Firm/Company

21050 point place, unit 2705
Address

Aventura, FL 33180
City/State and Zip Code

ABITTAN@ROYALSENIORS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Avi Bittan at (305) 3104477
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

May 25, 2012

AVI BITTAN
ROICO, INC.
21050 POINT PLACE UNIT 2705
AVENTURA, FL 33180

SUBJECT: ROICO, INC.
Ref. Number: P95000002472

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown
Regulatory Specialist II

Letter Number: 412A00015239

**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: RAICO, INC.
2. The principal office address: 21050 point place unit 2705
AVENTURA FL 33180
3. The mailing address (if different): - SAME -
4. Date of incorporation/qualification: 1.10.1995 Document number: _____
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)

CORPO, INC
21050 Point Place # 2705
AVENTURA, FL 33180

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

AW BITTAN
21050 point place unit 2705
AVENTURA FL 33180

P.O. Box NOT acceptable

☒ 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.


Signature of an officer or director

AW BITTAN
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

6.18.2012.
Date

If signing on behalf of an entity:

1
Typed 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 (03/12)

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