Division of Corporations Public Access System

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Division of Corporations

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From:

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: CORPORATION SERVICE COMPANY

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Fax Number

: (850)558-1575

REGISTERED AGENT CHANGE

R.S.E. CORP.

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R.A. Change

T BROWN MAY 2 4 2005

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

	he provisions of sections 607,0502, 617.0502, 607.1508, or 617.1 change is submitted for a corporation organized under the laws o		;
	rder to change its registered office or registered agent, or both, in		-
1. The name of	of the corporation: R.S.E. Corp.	W	
2. The principa	oal office address: c/O Edward R. Wildman, 11555 Hero	n Bay Boulevard, St	lite 200,
Coral Spi	orings, Florida 33076		
3. The mailing	g address (if different):		
4. Date of in∞	corporation/qualification: 2/5/1995 Document man	ber P950000	10441
	and street address of the current registered agent and registered of partment of State:	fice on file with the	
	Susan Rahn		
	20485 Linksview Way		
	Boca Raton, Florida 33434	•···	35
6. The name as (if changed)	and street address of the new registered agent (if changed) and /or i):	registered office	05 MAY 23 PM 3: 42 SECRETARY OF STATE SALLAHASSEE, FLORIC
	Edward R. Wildman		3 P
	11555 Heron Bay Boulevard, Suite 200		F 3
	(P.O. Box NOY acceptable)		REAL F.
	Coral Springs, Florida 33076		DE 2
The street add	dress of its registered office and the street address of the busine vill be identical.	ess office of its registered	agent,
Such change vauthorized by	was authorized by resolution duly adopted by its board of dire the board, or the corporation has been notified in writing of the	ctors or by an officer so ic change.	
	Peter Martin,		-
I hereby accept further agree of my duties, a document is be corporation ha	ept the appointment as registered agent and agree to act in this ee to comply with the provisions of all statutes relative to the pr and I am familiar with and accept the obligation of my position being filed merely to reflect a change in the registered office ac has been notified in writing of this change.	r typed name and (tite) capacity, coper and complete perfor nas registered agent. Or ldress, I hereby confirm t	rmance r, if this hat the
Ву		كون إما	<u> </u>
•	(Signature of Registered Agent) behalf of an entity:	(Date)	
Edward R. V	Wildman (Typol 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