P9110000011117

(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
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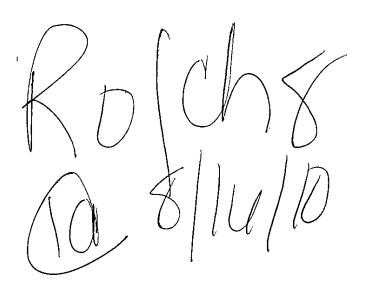
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TALLAHASSEE FLORIDA



COVER LETTER

Division of Corporations						
SUBJECT: RETIREMENT COUNCIL Name of Co						
Name of oc	·					
DOCUMENT NUMBER: P960	000011117					
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:						
GEORGE I	- GARSIA					
GEORGE H GARSIA Name of Contact Person						
RETIREMENT COUNCIL OF AMERICA INC						
Firm/Co						
444 NORTH PAULA						
Addr	ress					
DUNEDIN, FLO	ORIDA 34698					
City/State and Zip Code						
retirementcouncil@yahoo.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please c	all:					
GEORGE H. GARSIA Name of Contact Person	at (727) 734 8959 Area Code & Daytime Telephone Number					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address:	Street Address:					
Mailing Address: Amendment Section	Amendment Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle					

TO:

Amendment Section

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

statement of cha	provisions of sections 607.0 nge is submitted for a corp r to change its registered o	oration organize	d under the laws of the Stat	te of FLORIDA
1. The name of t	he corporation: RETIRE	EMENT CO	UNCIL OF AMERIC	CA INC
	office address: 444 NOR	RTH PAULA D	RIVE, SUITE 318,	
	, FLORIDA 34698	DOV 760	<u></u>	
_	ddress (if different): <u>P.O.</u> ARBOR, FLORIDA 34			
4. Date of incorp	oration/qualification:	1996	Document number:	P96000011117
	I street address of the current tment of State: (If resigned	•	at and registered office on f	ile with the
	GEORGE H GARSIA	4		. 4
	7617 KICKLITER LANE, LAND OF LAKES			
	FLORIDA 34637			HA550
6. The name and (if changed):	street address of the new r	registered agent (i	f changed) and /or register	102. 113
	GEORGE H GARSIA	4	· · · · · · · · · · · · · · · · · · ·	
	444 NORTH PAULA			
	DUNEDIN, FLORIDA	P.O. Box NOT ac	серявне	
The street address changed will	ess of its registered office	***************************************	dress of the business office	e of its registered agent,
•	as authorized by resolution ne board, or the corporation	n duly adopted by on has been notifi	y its board of directors or ed in writing of the chang	by an officer so e.
Signatu	e of an officer or director	 -	GEORGE H GARS	IA, PRESIDENT
I hereby accept I further agree to of my duties, and document is bei	the appointment as regist to comply with the provisi of I am familiar with and a ng filed merely to reflect a been notified in writing a	ered agent and a ons of all statute accept the obliga a change in the r of this change.	**	
	Form		08/10/2	010
-	nature of Registered Agent		Date	
If signing on be	half of an entity:			
	ORGE H GARSIA yped or Printed Name			

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