1980002824

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SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 1, 2007

SANDRA ARNOLD ROA COMPANY P O BOX 470882 LAKE MONROE, FL 32747

SUBJECT: SANFORD EXPRESS LUBE, INC.

Ref. Number: P98000028264

We have received your document for SANFORD EXPRESS LUBE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Letter Number: 507A00057316

Tina Roberts Document Specialist

Division of Cornerations - P.O. ROY 6327 - Tallahassaa, Florida 32314

COVER LETTER

TO: Amendment Section				
Division of Corporations				
Division of Corporations OLD NAME: SANFORD EXPRESS LUBE, INC.				
SUBJECT: NEW NAME: ROA COMPANY (Name of Corporation)				
(Name of Corporation)				
DOCUMENT NUMBER: <u>6980000 28264</u>				
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:				
SANDRA ARNOLD (Name of Contact Person)				
(Name of Contact Person)				
Roin COMPANY (Firm/Company)				
(Firm/Company)				
P.O. BOX 470882 (Address)				
(Address)				
LAKE MONROE, FL 32747 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
2011200 100111				
SANDRA ARNOLD at (407) 435-8104 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
(table of Colombia of Colombi				
Enclosed is a \$35.00 check made payable to the Department of State.				
Matthew Additions Chant Additions				

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

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

statement of change	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, th unge is submitted for a corporation organized under the laws of the State of <u>FLOR</u> r to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	the corporation: RYSAND COMPANY	
2. The principal of	office address: 333 E. HIGHBANKS RD SUITE 27	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	DEBARY, FL 32713	
3. The mailing add	ddress (if different): P.O. BOX 470882	
	LAKE MONROE, FL 32747	
4. Date of incorpor	poration/qualification: 3/24/98 Document number: P980000	28264
5. The name and s Florida Departm	I street address of the current registered agent and registered office on file with the trment of State:	
_	RUDY O. ARNOLD	A\$1
	2413 S. FRENCH AVE	ري در ا
_	SANFORD, FL 32771	CRE
6. The name and s (if changed):	d street address of the new registered agent (if changed) and /or registered office	SSESSES SE
_	SANDRA A. ARNOLD	通事 。
_	(P.O. BOX NOT acceptable)	ILED ARYES
_	DEBARY, FL 32713	FLO
The street address as changed will b	ess of its registered office and the street address of the business office of its register be identical.	e Bagent, G
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer see board, or the corporation has been notified in writing of the change.	О
Signature (Signature	SANDRA A. ARNOLD VP/E	SEC/TREAS
I hereby accept the I further agree to of my duties, and document is being corporation has been to be accepted.	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete pen nd I am familiar with and accept the obligation of my position as registered agent ing filed merely to reflect a change in the registered office address, I hereby confir s been notified in writing of this change.	rformance Or, if this n that the
fandi	gnature of Registered Agent) 9/19/07 (Date)	
If signing on beha	ehalf of an entity:	
_SANDRA	A. ARNOLD Trinted Name)	

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