P9900026523 Requestor's Name

_ Z	leix Pellegrino gor pomono sure clado Fl 32867	
	closes A 0000%	Office Use Only
CORPOR	ATION NAME(S) & DOCUMENT NU	MBER(S), (if known):
		.0
1	(Corporation Name) (I	Document #)
2.		THE SERVICE STATES
2.	(Corporation Name) (I	Document #)
3	(Corporation Name) (I	Document #)
,	(Conposition Name)	BACK TO THE REAL PROPERTY OF THE PARTY OF TH
4	(Corporation Name)	Occument #)
☐ Walk i	Pick up time	Certified Copy
_		p
☐ Mail o	it	Certificate of Status
NEW FILING	AMENDMENTS	7000029547679
Profit	Amendment	-08/09/9901143003 ******35.00 ******35.00
NonProfit	Resignation of R.A., Officer/ Di	rector ************************************
Limited Liability		
Domestication	Dissolution/Withdrawal	÷ · ·
Other	Merger	
OTHER	INGS REGISTRATION/	
OTHER FI	QUALIFICATION	
Annual Report Fictitious Name	Foreign	RA Chg.
Name Reservat	Limited Partnership	$MP \supset \mathcal{G}$
Name Reservat	Reinstatement	
	Trademark	W SOMETHING ALL 17 1000
	Other	W. SHEPARD AUG 171990
CR2E031(1/95)		Examiner's Initials

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,			
the undersigned corporation organized under the laws of the State of Florior			
submits the following statement in order to change its registered office or registered agent, or both, in			
the State of Florida.			
1. The name of the corporation is: R. P.C. Management Investment. TWC:			
2. The mailing address of the corporation is: 907 Romano Ave			
ORlando Fl 37807			
3. Date of incorporation/qualification: $\frac{3}{17}\frac{99}{99}$ Document number: $\frac{9990000365}{9990000365}$			
4. The name and address of the current registered agent and office:			
4. The name and address of the current registered agent and office: PEISIE PEICOPINO ROBERT PAUS Solution of the new registered agent and office: (P. O. Box Not Acceptable) EISIE PEICOPINO OR DESCRIPTION OF THE POWER OF TH			
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)			
Elsie Hellegring			
907 Ramon QUE			
OR (1000 PL 3280)			
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. (Signature of an officer chairman of vice chairman of the board) (Date)			
President			
(Printed or typed name and title)			
Having been named as registered agent and to accept service of process for the above stated corporation, 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 duries, and I am familiar with and accept the obligation of my position as registered agent.			
8/5/99			
(Signature of Registered Agent) (Date)			
If signing on behalf of an entity:			
(Typed or Printed Name) (Capacity)			
(Typed of Filined Name) (Capacity)			
* * * FILING FEE: \$35.00 * * *			

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314