

LOG 0000 12911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

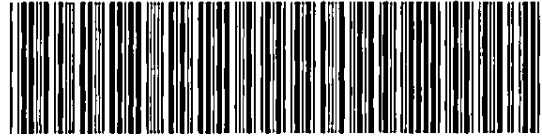
(Business Entity Name)

(Document Number)

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MAR 3 2020
MAR 7 4:45 AM
STATE
FL

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O SIMMONS
MAR 23 2020

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: RSSR LC

2. (a) _____ (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

4811 S 76TH ST #211

4811 S 76TH ST #211

GREENFIELD, WI 53220

GREENFIELD, WI 53220

2/11/2020

L06000012911

3. 2/11/2020 Date of filing/registration in Florida 4. L06000012911 Document number

5. (a) _____

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

SUSAN L RIORDAN

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

9754 BENT GRASS BEND

NAPLES, FL 34108

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 2020 MAR -3 AM 7:45
 STATE OF FLORIDA

(b) REALTY MANAGEMENT CONSULTANTS INC

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

2780 E FOWLER AVE #2004

TAMPA, FL 33612

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Lynne M. Miller

LYNNE M MILLER

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Lynne M. Miller

Signature of Registered Agent