## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000085066

Entity Name: RSI LLC

**Current Principal Place of Business:** 

8145 SOUTH TROPICAL TRAIL MERRITT ISLAND. FL 32952

**Current Mailing Address:** 

8145 SOUTH TROPICAL TRAIL MERRITT ISLAND. FL 32952

FEI Number: 47-4017838 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLAVIN NOONEY & PERSON 2200 SOUTH BABCOCK STREET MELBOURNE, FL 32901 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Title

Address

MGR

730 PROVINCE PLACE SE

SIGNATURE:

Address

Electronic Signature of Registered Agent

Date

**FILED** Jun 04, 2020

**Secretary of State** 

0421567989CC

Authorized Person(s) Detail:

Title MGR

REDDY, ANJANA Name REDDY, APARNA Name

8145 SOUTH TROPICAL TRAIL

City-State-Zip: ATLANTA GA 30312 MERRITT ISLAND FL 32952 City-State-Zip:

Title REGISTERED AGENT Title MGR

Name FLAVIN NOONEY & PERSON CPAS Name SHEKHAT, ARATHI

2200 S. BABCOCK STREET Address Address 4001 FUNSTON CIRCLE MELBOURNE FL 32901 City-State-Zip: City-State-Zip: MELBOURNE FL 32940

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHUCK ELLEFSON

REGISTERED AGENT

06/04/2020