2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000008769

1. Entity Name

R.M. SMITH CONSULTING SERVICES, LLC

FILED
03 OCT 28 AM 9:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
1015 S.E. 11TH COURT FORT LAUDERDALE FL 33316	1015 S.E. 11TH COURT FORT LAUDERDALE FL 33316

2. Principal Place of Business		3. Mailing Address	
1015 S.E. 11th CT		1015 S.E 11th CT	
Suite, Apt. #, etc.		Suite, Apt. #, etc	
City & State: FT. LAUDERDALE Fl		City & State: FT. LAUDERDALE, Fl	
Zip: 33316	Country: USA	Zip: 33316	Country: USA

10/28

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 41-2040565 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SMITH, REGINA M 1015 S.E. 11TH COURT FORT LAUDERDALE FL 33316	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Regina M. Smith — 9/04/03 ~~9/04/03~~
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT REGINA M. SMITH — MGRM 1015 S.E 11th CT FT. LAUDERDALE, Fl 33316 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S03254900564 09/08/03 90075 006 ~~$50.00~~ ☐ Change ☐ Addition
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CR2E083 (4/03)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: Regina M. Smith — 9/04/03 ~~9/04/03~~ 954-523-4729