

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92173 005 ****50.00

0014193

DOCUMENT # L02000012351

1. Entity Name

RMD HOLDINGS LLC



Principal Place of Business

**777 BRICKELL AVENUE STE. 1070
MIAMI FL 33131**

Mailing Address

**777 BRICKELL AVENUE STE. 1070
MIAMI FL 33131**

2. Principal Place of Business

2110 N. Ocean Blvd.

3. Mailing Address

2110 N. Ocean Blvd.

Suite, Apt. #, etc.

Unit 27-D, Tower II

Suite, Apt. #, etc.

Unit 27-D, Tower II

City & State

Fort Lauderdale, Florida

City & State

Fort Lauderdale, Florida

Zip

33305

Country

USA

Zip

33305

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

42-1537465

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MONTELLO, LOUIS R
777 BRICKELL AVENUE STE. 1070
MIAMI FL 33131**

7. Name and Address of New Registered Agent

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

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 May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **DORFMAN, RANDY**
STREET ADDRESS **777 BRICKELL AVENUE STE. 1070**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGR** ☒ Change ☐ Addition
NAME **Dorfman, Randy**
STREET ADDRESS **2110 N. Ocean Blvd., Unit 27-D, Tower II**
CITY-ST-ZIP **Fort Lauderdale, Florida 33305**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: Randy Dorfman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/17/03

(954) 561-3033

Date

Daytime Phone #

CR2E083 (10/02)