

L02000029265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200041633152

10/18/04--01040--000 **\$5.00

LC 11/04/04

FILED
04 NOV -3 PM 1:50
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 20, 2004

RMG CAPITAL L.L.C.
P.O. BOX 8762
SEMINOLE, FL 33775

SUBJECT: RMG CAPITAL L.L.C.
Ref. Number: L02000029265

We have received your document for RMG CAPITAL L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 604A00060318

FILED
04 NOV -3 PM 1:50
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: RUG CAPITAL, LLC

2. The mailing address of the limited liability company is: _____

P.O. BOX 8162, SEMINOLE FL 33775

11/4/02

3. Date of filing/registration in Florida

L02000029265

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

DEBORA. L. SIMMONS

Name

14240 PASSAGE WAY

Address

SEMINOLE FL 33776

City, State and Zip

6. The name and address of the new registered agent and/or office:

JAMES MCARTHUR

Name

9825 HARRELL AVE #303

Florida street address (P.O. Box NOT acceptable)

TREASURE ISLAND FL 33706

City, State and Zip

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.

(Signature of a member or authorized representative of a member)

(Printed or typed name of signer)

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 608, 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.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILED
NOV -3 PM 1:56
TALLAHASSEE, FLORIDA