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Promote motion

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TO:

COVER LETTER

Registration Section Division of Corporations

SUBJECT: RUMAHCASA HOMES, LLC	
Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
TECK S. NG	
Name of Person	
RUMAHCASA HOMES, LLC	
Finn/Company	
1531 Drexel Road, #269	
Address	
W. Palm Beach, FL 33417	
City/State and Zip Code	
ng t@bellsouth.net	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
or further information concerning and matter, preuse can.	
TECK S. NG at (561) 317-1992	
TECK S. NG at (561) 317-1992 Name of Person Area Code Daytime Telephone Number	_
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee \$ \$30.00 Filing Fee & \$ \$55.00 Filing Fee & \$ \$60.00 Filing Fe	ee.
Certificate of Status Certified Copy Certificate of Status	
(additional copy is enclosed) Certified Copy	
(additional copy is	enciosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

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.

I. Na	ne of the limited liability company:	RUMA	HCASA	HOMES	LBC	
2. (a) ₋	1531 BREXEL Rel	Jot 269	(b)			
	Principal office address of limited liability		· , —	Mailing address of lin		
	(Note: MUST BE STREET ADDR			(Note: MAI BE I	<u>POST OFFICE BO</u>	<u>'A</u>)
						···
	FC-33	417.				
	7/2/2005			L050	000719	148
3.	Date of filing/registration in Flo		4.	Document numb	per	
5. (a)	BRETTON PON	DERSO	\sim			
5. (u)	Registered Agent and Registered Office shown on			ate:		
	5"31 35BA	MOBZI	AJRE	BR.		
	-	IDA STREET ADD	RESS)			
	WEST	praine 1	BEACH			
			32415			
		, FL	J244 1			
(b)						
	Enter name of NEW Registered Agent and/or NI	EW Registered Off	ice address:	_	∓ ∂	,
	REBECCA MAG	LKEE		_	LLAH!	AON 7
	NEW Registered Office Address:			_	ASS	5 I
	4 PINERZPG				ĘĘ, Č	
	POVIERA BRACH		-7'-		FL	₹)
	PEVIERA BRACH	, FL	5340	\mathcal{L}	TAT OR II	94:
if the li	mited liability company is not organized				Confirmed that	-
the cha-	nge or changes are made, the Florida stre	et address of the	registered off	ice and the busines	s office of the r	egistered
agent w was/we	rill be identical. Or, in the case of a Flori re authorized by an affirmative vote of the	ida limited liabil ne members of th	ity company, it ie limited liabil	t is hereby confirm lity company or as	ed that the chan otherwise provi	ige(s) ided in
the arti	cles of organization or the operating agre	ement of the lim	ited liability co	ompany.		
	Miller			TELL S	NG	
J	ure of a member or authorized representative of a			Printed or typed no	_	
provision the obli to mere notified	y accept the appointment as registered a constant of all statutes relative to the proper of gations of my position as registered age by reflect a change in the registered officion writing of this change.	igent and agree ind complete per ind complete per int as provided fo e address, I here	to act in this co formance of m ir in Chapter 6 eby confirm the	pacity. I further a y duties, and I am 05, F.S. Or, if this at the limited liabil	igree to comply familiar with ai document is be lity company ha	with the nd accept ing filed s been