

L05 000075924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

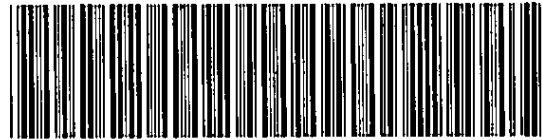
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07/02/21--01017--013 **25.00



08/10 AM 11:24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RSA Cocoa, 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:

Lynne Moody

Name of Person

JM Real Estate, Inc.

Firm/Company

2425 Pineapple Avenue, Suite #108

Address

Melbourne, FL 32935

City/State and Zip Code

kristen@jmrealestate.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lynne Moody

at (321) 242-2882

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



RECEIVED

2021 AUG 10 PM 1:42

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2021

LYNNE MOODY
2425 PINEAPPLE AVENUE
SUITE 108
MELBOURNE, FL 32935

SUBJECT: RSA COCOA LLC
Ref. Number: L05000075924

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

The registered agent must sign accepting the designation.

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) 245-6050.

Summer Chatham
OPS

Letter Number: 021A00017156

2021 AUG 10 AM 11:24

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Division of Corporations**

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242-2882

at ()

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Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
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(additional copy is enclosed)

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 210
Tallahassee, FL 32309

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RSA Cocoa, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/03/2005 and assigned Florida document number L05000075924.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

<u>Name of New Registered Agent:</u>	<u>JM Real Estate, Inc.</u>
<u>New Registered Office Address:</u>	<u>2425 Pineapple Avenue, Suite #108</u> <small>Enter Florida street address</small>
	<u>Melbourne</u> , <u>Florida</u> <u>32935</u> <small>City Zip Code</small>

New Registered Agent's Signature, if changing Registered Agent:

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 605, 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.

[Handwritten signature]

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Richard Smith-Allen	2425 Pineapple Avenue	<input type="checkbox"/> Add
		Suite #108	<input checked="" type="checkbox"/> Remove
		Melbourne, FL 32935	<input type="checkbox"/> Change
MGR	The Richard and Helen Smith-Allen	2425 Pineapple Avenue	<input checked="" type="checkbox"/> Add
		Suite #108	<input type="checkbox"/> Remove
		Melbourne, FL 32935	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10

10	7	1	24
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated _____

Signature of a member or authorized representative of a member

Richard Smith-Allen Trustee of the Richard and Helen Smith-Allen Trust

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