

LO6 0000 11023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LO6-11023



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 11, 2007

JUAN ALFREDO RUIZ  
RR FLORIDA INVESTMENTS, LLC  
3320 LOWSON BLVD  
DELRAY BEACH, FL 33445

SUBJECT: R & R FLORIDA INVESTMENTS, LLC  
Ref. Number: L06000011023

We have received your document for R & R FLORIDA INVESTMENTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 407A00002482

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ENCLOSED PLEASE FIND THE  
CORRECT FORM.  
CHECK # 2016 FOR \$35 WAS CASHED ON 1/15/07  
PLEASE REFUND \$10  
Thank & Regard,

  
JUAN ALFREDO RUIZ

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RR FLORIDA INVESTMENTS, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN ALFREDO RUIZ

(Name of Person)

RR FLORIDA INVESTMENTS, LLC

(Firm/Company)

3320 LOWSON BLVD.

(Address)

DELRAY BEACH, FL 33445

(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JUAN ALFREDO RUIZ at (561) 350-6923  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

*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.*

- INHS18 (8/05)