## L06000021045

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## **COVER LETTER**

* TO: Registration Section Division of Corporations		
	LL C 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:	
Randy Degler Name of Person		
Firm/Company		
2745 Se 2 <sup>nd</sup> c	<u></u>	
Pumpano Beach City/State and Zip Code	FL 33062	
Randy Deglet D Sawgrass 13 wilder in c. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Randy Deglet	at ( 561) 445-7542  Area Code & Daytime Telephone Number	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassec, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

## 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 liability company submits the following statement in order agent, or both, in the State of Florida.	to change its registered office or registered
1. Name of the limited liability company: RLBJ	LLC
2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	
(Appel Mess Destriber Masses)	Programo Beach FL 3306
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2745 Se 2nd Ave
-	Pompino Beach FL
Feb 13 2013	L06000021045
3. Date of filing/registration in Florida 4	Document number
5. (a) Registered Agent and Registered Office shown on th	e records of the Florida Dept. of State:
Registered Agent:	Randy Degler
Registered Office Address:	2745 Se 2ªd Ave
·	Pompano Beach FL 33062
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEW</b>	Registered Office address:
<u><b>NEW</b></u> Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2745 se 2nd ct
	Pompano Beach ,FL 33062
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Rand W De 9 / el	orida street address of the registered office cal. Or, in the case of a Florida limited r
Printed or typed name of signee	
I hereby accept the appointment as registered agent and age comply with the provisions of all statules relative to the propand I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company Signature of Registered Agent	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Division of Corporations, P.O. Box 632	7, Tallahassee, FL 32314

**FILING FEE: \$25.00**