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(Address)						
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D. BRUCE MAY 0 8 2017

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Rugal Nam	Oaks	Square LLC d Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	ice Change a	and fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to t	the following:	
Charlotte Tilley			
Name of Person			
Law Office of Michael Tilley			
Firm/Company			
128 Wilderness Cay			
Address		- ECR	<u>n</u>
Naples FL 34114		HASSETAR	_
City/State and Zip Code		- Erg D	0
Mike@MRTilley.com		Topic w	
E-mail address: (to be used for future ann	ual report no	otification)	
For further information concerning this matter,	please call:		
Charlotte	561	392-5707	
Name of Person		Area Code & Daytime Telephone Number	
Registration Section Reg Division of Corporations Div Clifton Building P.C		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	à.
Enclosed is a check for the following			
△ \$25 Filing Fee	٥	\$55 Filing Fee & Certified Copy	
INHS18 (2/14)			

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.

1.	Na	me of the limited liability company: Royal Oaks Sq	uare	, LLC			
				(b)			
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		6400 N Andrews Ave Ste 490	_				
		Ft Lauderdale, FL 33309					
		01/08/2007		L0700000	02568		
3.		Date of filing/registration in Florida	4.		Document number		
5	(a)	INCORP SERVICES, LLC					
٠.	(4)	Registered Agent and Registered Office shown on the records of t	he Flo	rida Dept. of Sta	_ te:		
		17888 67Th Court North					
		Registered Office Address (MUST BE FLORIDA STREET A	SECRET NAY				
		Loxahatchee, FL		33470	ARY ARY		
	(b)	InCorp Services, Inc.					
	(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	ORID CARD		
		17888 67th Court North			» -		
		NEW Registered Office Address:		_	_		
		Loxahatchee, FL 33470			_		
		Loxahatchee , FL		33470	_		
th ag w th	e cha gent v as/we e arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member of a member of a member of a member on a dil statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I in writing of this change.	the reability of the limite	egistered office company, it limited liabilited liability con	the and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Printed or typed name of signer file.		
	<u> </u>	Cof Reason Agent Losie A Sorensen on beh	alf of	Incorp Service	es, Inc.		
Division of Corporations • P.O. Box 6327 • Taliahassee, FL 32314							