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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: RLP General S Name of Limite	d 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 m	natter to the following:	
Ricar do L Pacheco Name of Person RLP General Services Firm/Company 9361 Sw 32 st Address Miani (1 33165 City/State and Zip Code Ricardo Pacheco Yattoocc E-mail address: (to be used for future annual report notification	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
For further information concerning this matter, ple	ease call:	
Ricardo Pacheco at (786) 553 - 3474 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	

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, 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.

(Note: MUST BE STREET ADDRESS) 15770 Sw 297th St Homestead, Cl 33033	1. Name of the limited liability company: RIP 6e	neral Services LLC			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (STROKE SOLUTION SOLUT	2. (a) Principal office address of limited liability compan	y: <u>RIP General Services LLC</u>			
(Note: MAY BE POST OFFICE BOX) 15 770 Sw 2971 st Hamestend, Cl 320 33 10 80000 78 706 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: NEW Registered Agent: NEW Registered Agent: NEW Registered Agent: NEW Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of the limited liability company. Signature of a member of the limited liability company. Signature of a member of the limited liability company. Signature of a member of the limited liability company. Signature of a member of the limited liability company.	(Note: MUST BE STREET ADDRESS)	15770 SW 297th St Homestead, \$1 33033			
3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: NEW Registered Agent: NEW Registered Agent: NEW Registered Office Address: NEW R	(b) Mailing address of limited liability company:	RIP General Services UC			
3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: NEW Registered Agent NEW Registered Agent: NEW Registered Office Address: NEW		15770 Sw 297th st Homestend, Cl 32033			
Registered Office Address: Registered Office Address: MEW Registered Agent NEW Registered Office Address: NEW Registered Office Address of A	, , , , , , , , , , , , , , , , , , ,				
Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Signature of a member or authorized representative of a member Thereby accept the appointment as registered agent and agree to act in this capacity. Higher provisions of all statutes relative to the proper and complete performance of a during the proper and complete performance of the during the performance of the during the proper and complete performance of the during the performance of the performance of the performance of the performance of the perfor	5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Thereby accept the appointment as registered agent and agree to act in this capacity. Hinthe prepared administration of the prepared with the provisions of all statutes relative to the prepared agent and agree to act in this capacity. Hinthe prepared administration of the prepared agent and agree to act in this capacity. Hinthe prepared administration of the prepared agent and agree to act in this capacity. Hinthe prepared agent and agree to act in this capacity. Hinthe prepared agent and agree to act in this capacity. Hinthe prepared agent and agree to act in this capacity agreement.	Registered Agent:	Ricar bo L Pacheco			
NEW Registered Office Address: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Thereby accept the appointment as registered agent and agree to act in this capacity. Hinthe property of a listature	Registered Office Address:	9361 Sw 32 St Miami, Fl 33165			
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Signature of Registered Agent	confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Wordes. Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my por Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company.	Florida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote rwise provided in the articles of organization y.			