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S. YOUNG

(((H14000197458 3))), COVER LETTER

.. TO: Registration Section

Division of Corporations

RSM REPORTS LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to the following:

•	Stephen R. Loon	ey, Esq.		
		Name of Person		高
	Dean, Mead, Egertor	ı, Bloociworth, Capo	uano & Bozarth, P.A.	
		Firm/Company		
	800 N Magnolia Av	enue, Suite 1500		9 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
		Address		- 511 m
	Orlando, FL 32803			
		City/State and Zip Code		-
	kent53150@yahoo	o.com		
	E-mail address: (to be used for future, annual	report notification)	
For further information con	ncerning this matter, please or	all:		
Stephen R. Loc	ney, Esq.	407 42	28-5128	
Name of	² 0180.1	Area Code	Daytime Telephone Numbe	ur
Buclosed is a check for the	following amount:			
S25.00 Filing Foe	l \$30.00 Filing Fee & Certificate of Status	S55:00 Filing Fee & Certified Copy (additional copy is end	Certifies (losed) Certifies	ute of Status &

MALLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallabassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICHESPON SYMBERDMENT ARTICLES OF ORGANIZATION \mathbf{OF}

RSM REPORTS LLC		
(Name of the Limited Liability Company as it now sund (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Company were filed on Torida document number L08000040630	4/23/2008	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability company l	<u>here</u> :	SECRET F
ne new name must be distinguishable and end with the words "Limited Liability Company," it	e designation "LLC"	or the abbreviation "L.L.G."
ater new principal offices address, if applicable:		
Principal office address: MUST BE A STREET ADDRESS)		
		表注 6 事 5
uter new mailing address, if applicable:		
Mailing address MAY iRE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office address of	on our records.	enter the name of the c
egistered agent and/or the new registered office address here:	on our records;	
Name of New Registered Agent:		
New Registered Office Address:	······································	
Enler F.	lorida street address	
City	, Flori	daZip Code
ew Registered Agent's Signature, if changing Registered Agent:		(
hereby accept the appointment as registered agent and agree to act in thi provisions of all statutes relative to the proper and complete performance accept the obligations of my position as registered agent as provided for in	of my duties, and Chapter 605, F.	I am familiar with and 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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

ſ.

If amending the Managers or Authorized Member deal Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	<u>Address</u>	Type of Action
MGRM	Kent Campbell	1007 Livingston Loop	□ Add
		Lady Lake, FL 32162	Remove
MGR	Kent Campbell	1007 Livingston Loop	= Add
		Lady Lake, FL 32162	Remove
			□ Add
			Add O
			D Add
			□ Remove

	iding any other information, enter character (1) 1004:9(7458) 3) bittional sheets, if necessary.)
A	article IV of the Articles of Organization shall be amended as follows:
A	ARTICLE IV - Management
7	he Company is a manager managed company. The name and
a	ddress of the Manager of the Company are:
	Kent Campbell, 1007 Livingston Loop, Lady Lake, FL 32162
(The effect	ve date, if other than the date of filing:
Dated_	August 2(, 2014
	Signature of a member or surhorized representative of a member
	Kent Campbell

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00