

L08000065170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 3, 2015

MYRA SMITH
8530 SW JAYME WAY
PALM CITY, FL 34990

SUBJECT: R J M DEVELOPMENT LLC
Ref. Number: L08000065170

We have received your document for R J M DEVELOPMENT 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):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Stacey M Mason
Regulatory Specialist II

Letter Number: 915A00025345

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: R J M DEVELOPMENT 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:

MYRA SMITH

Name of Person

R J M DEVELOPMENT LLC

Firm/Company

8530 SW JAYME WAY

Address

PALM CITY, FL 34990

City/State and Zip Code

MYRA@MANCILS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MYRA SMITH

Name of Person

at (772) 286-0951

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 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.

2. (a) 8530 SW JAYME WAY, PALM CITY, FL 34990
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) 8530 SW JAYME WAY, PALM CITY, FL 34990
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

5. (a) MYRA SMITH
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1537 SW BUCKSKIN TRAIL, STUART, FL 34997


(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

same

NEW Registered Office Address:

FL

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TALLAHASSEE, FLORIDA

the articles of organization or the operating agreement of

 Signature of a member or authorized representative of a member

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.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.

INHS18 (2/14)