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T. HAMPTON

OCT 2 9 2009

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: RSLM Holdings, LLC Name of Limited Liability Company	
Name of Engineer Elability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Rodney McClain Name of Person	
RSLM Holdings, LLC Firm/Company	<del></del>
. 2212 NW 129th Ave	·
Pembroke Pines, FL 33028 City/State and Zip Code mcclain & principle capital controls.	
mann of the property of	
E-mail address: (to be used for future annual report notificat  For further information concerning this matter, please call:	ion)
Rodney McClain at (954) 534-97 Name of Person Area Code & Daytime To	765 elephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$ Certificate of Status  \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. RSLM Hold	lings, LL	<u></u>			
(Name of the Limited Li (A Fl	ability Company orida Limited Lial	as it now appears of oility Company)	n our records.)		
The Articles of Organization for this Limited Liab		ere filed on	1/25/2008	and ass	igned
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of th	e limited liabilit	y company here:			
The new name must be distinguishable and end with the "L.L.C."		Liability Company,	'the designation "LI	.C" or the a	ıbbreviatior
Enter new principal offices address, if applicables and the state of t	-		···		<del></del>
(Principal office address MUST BE A STREET A	A <i>DDKESS)</i>				<u>S</u> N
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	- - - - -			9 0CT 28 AN I	ECRETARY OF S
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on our	records, enter th	e name o	ATIONE new
Name of New Registered Agent:  New Registered Office Address:	Daniel 3890 7	Friebis Title Creek	Dr Suit	e B	
-	Port Oro	inge Cin	, Florida	32127 Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address f 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 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action Radney D. McClain □Add Remove ☐ Add Remove □ Add Remove Add Remove □Add Remove  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ignature of a member or authorized representative of a member M-Clain Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00