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COVER LETTER

Division of Corporations			
-SUBJECT: RMWBakken LL	C		
	Limited Liabil	ity Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change	and fee(s) are submitted	d for filing.
Please return all correspondence concerning	g this matter to	the following:	
Richard M. Waterman			
Name of Person	· · · · · · · · · · · · · · · · · · ·	-	
RMWBakken LLC			
Firm/Company			2013 FALL
520 Captains Neck Lan	е		2013 APR 29
Address		_	<u>Γή</u> → πα
Southampton, NY 1196	8	_	PH 6: 01
City/State and Zip Code		-	OA I
plbeach1@comcast.net		_	
For further information concerning this mat		:	
Pam Beach	_{at (} 561	779-9773	
Name of Person		Area Code & Daytime Telepho	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.O Tall	isitration Section ision of Corporations Box 6327 lahassee, Florida 32314	
Enclosed is a check for the following	ing amount:		

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

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. 1. Name of the limited liability company: RMWBakkan, LLC 2. (a) Principal office address of limited liability company: 520 Captains Neck Lana (Note: MUST BE STREET ADDRESS) Southampton, NY 11968 (b) Mailing address of limited liability company: 520 Captains Neck Land Southampton NY 11968 (Note: MAY BE POST OFFICE BOX) 9/29/2008 L08000092320 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Richard M. Waterman Registered Agent: Registered Office Address: 315 S. Lake Orive Palm Beach, FL 33480 (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>: NRAI Servicus Inc. **NEW** Registered Agent: NEW Registered Office Address: 1200 South Pine Island Road (MÚST BE FLORIDA STREET ADDRESS) Suite 1000 Plantation, FL 33324 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 mitted 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 Richard M. Waterman Printed or typed name of signee 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. I hereby confirm that the limited liability company has been notified in writing of this change. Lanita Raney, Assistant Secretary Signature of Registered Ages

> Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)