## L08000107520

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DEC 1 9 2013

T. BROWN

## COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: ROMHCA, L.L.C.

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:

R. David Evans

Name of Person

Peterson & Myers, P.A.

Firm/Company

225 E. Lemon Street, Ste. 300

Address

Lakeland, Florida 33801

City/State and Zip Code

devans@petersonmyers.com

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

For further information concerning this matter, please call:

R. David Evans

∠863 <u> 68</u>3

Name of Person

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.

1. N	ame of the limited liability company: ROMHCA, L.L.C.		
2. (a	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 3655 Innovation Drive	
	(TWEET MUST BE STREET NUBRESS)		20.00
(b	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Post Office Box 1089 Highland City, Florida 33846	10 E F
			100 mg 10
11/19/2	2008	L08000107520	15 15 15 15 15 15 15 15 15 15 15 15 15 1
3. D	ate of filing/registration in Florida	4. Document number	ORE S
5. (a	a) Registered Agent and Registered Office shown of	on the records of the Florida D	ept. of State:
	Registered Agent:	Jonn D. Hoppe	
	Registered Office Address:	225 E. Lemon Street	
		Suite 300	
		Lakeland, Florida 33801	
(b	<ul> <li>Enter name of <u>NEW Registered Agent</u> and/or <u>N</u></li> <li><u>NEW</u> Registered Agent:</li> </ul>	EW Registered Office address  R. David Evans	<u>ess</u> :
	NEW Registered Office Address:	225 E. Lemon Street	
(MUST BE FLORIDA STREET ADDRESS)		Sulte 300	
		Lakeland	,FL <u>33801</u>
confi and t liabil the m the o	e limited liability company is not organized under the rmed that after the change or changes are made, the he business office of the registered agent will be ide ity company, it is hereby confirmed that the change nembers of the limited liability company or as other perating agreement of the limited liability company when I go of a member of authorized representative of a member	e Florida street address of the rentical. Or, in the case of a Florida was/were authorized by an wise provided in the articles of	egistered office orida limited affirmative vote of
	Samily Komero.		
	d or typed name of signee		
I her comp and I Chair addr	reby accept the appointment as registered agent and ly with the provisions of all statutes relative to the lam familiar with and accept the obligations of my Der 608, F.S. On, if this document is being filed to less I hereby confirm that the limited liability comp	d agree to act in this capacity. proper and complete performe position as registered agent a merely reflect a change in the any has been notified in writin	I further agree to ince of my duties, s provided for in registered office g of this change.
Signa	ture of Registered Agent		

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