

LD9000005671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

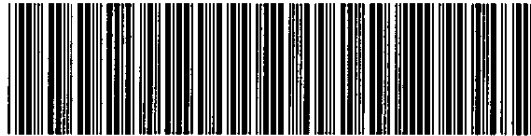
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09 MAR 20 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAR 25 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE RAYDEN GROUP
(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:

EDDIE LEE WILCOX JR

(Name of Person)

THE RAYDEN GROUP LLC

(Firm/Company)

18505 SW 104 AVENUE UNIT 7

(Address)

MIAMI, FL 33157

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

EDDIE WILCOX at (305) 495-5991
(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. Name of the limited liability company: THE RAYDEN GROUP

2. (a) Principal office address of limited liability company: 18505 SW 104 AVENUE UNIT 7

(Note: **MUST BE STREET ADDRESS**)

MIAMI, FL 33157

(PLEASE REPLACE WITH ABOVE ADDRESS)

(b) Mailing address of limited liability company: 18505 SW 104 AVENUE UNIT 7

(Note: **MAY BE POST OFFICE BOX**)

MIAMI, FL 33157

(PLEASE REPLACE WITH ABOVE ADDRESS)

01/20/2009

3. Date of filing/registration in Florida

L09000005671

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

EDDIE LEE WILCOX JR

Registered Office Address:

815 N HOMESTEAD BLVD #259

HOMESTEAD, FL 33030

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

NEW Registered Agent:

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

18505 SW 104 AVENUE UNIT 7

MIAMI, FL

FL 33157

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 limited 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.

Eddie Lee Wilcox JR
(Signature of a member or authorized representative of a member)

Eddie Lee Wilcox JR
(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.

Eddie Lee Wilcox JR
(Signature of Registered Agent)

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

FILING FEE: \$25.00