## L11000050031

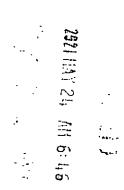
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| PICK-UP WAIT MAIL                       |  |  |  |  |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |  |  |  |  |
| (Dusiness Entity Name)                  |  |  |  |  |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |  |  |  |  |
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CSC - WILMINGTON 251 Little Falls Drive Wilmington . De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 19, 2021

Order#: 819975/028

Re: RH VENTURE II, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

Return Regular Mail in the enclosed envelope.

> Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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.

| ۱.                             | Na                        | ame of the limited liability company:  | RH VENTURE II, LLC  |  |   |  |  |   |  |
|--------------------------------|---------------------------|--|---|--|---|--|--|---|--|
| 2. (                           | a)                        | 7807 Baymeadows Road East  |   | (  | b)  |  |  |   |  |
| 2. (                           | ,                         | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  |   |  |   | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)   |  |   |  |
|                                |                           | Suite 205  | _   |  |   |  |  |   |  |
|                                |                           | Jacksonville, FL 32256   |   | <del></del>  |   |  |  |   |  |
|                                |                           | 04/27/2011   |   |  | L11000050   | 0031   |  |   |  |
| 3.                             |                           | Date of filing/registration in   | r Florida   | 4.   |   | Document number  |  |   |  |
| 5. (a)                         | (a)                       | Feldman & Mahoney, P.A.  |   |  |   |  |  |   |  |
|                                | ()                        | Registered Agent and Registered Office shown on the records of th  |   |  | a Dept. of Stat   | <del>-</del><br>le:  | • •  | 25.                                       |  |
|                                |                           | 2240 Belleair Road, Suite 210  |   |  |   |  | 4. L   | 2521 111/1                                |  |
|                                |                           | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)   |   |  |   | _  |  | NY 24                                     |  |
|                                |                           | Clearwater   |   | 33764  |   | _  | ;  | 14 6: 41                                  | The state of the s |
|                                | b) .                      | Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company  |   |  |   | -  |  | <b>⊕</b> 1                                |  |
|                                |                           | NEW Registered Office Address:   |   |  |   | _  |  |   |  |
|                                |                           | 1201 Hays Street   |   | <u></u>  |   | _  |  |   |  |
|                                |                           | Tallahassee  | F   | 32301<br>L   |   | _  |  |   |  |
| chan<br>agen<br>was/<br>the a  | ge<br>t w<br>we<br>rtic   | mited liability company is not organi<br>or changes are made, the Florida stre<br>/ill be identical. Or, in the case of a F<br>re authorized by an affirmative vote of<br>cles of organization or the operating of<br>ward E. Burr | et address of the<br>Florida limited li<br>of the members | e registere<br>lability co<br>of the ling<br>limited l | ed office and<br>ompany, it is<br>sited liabilit            | d the business office<br>s hereby confirmed t<br>y company or as oth<br>ipany.   | of the i                                     | egistere<br>change(                       | :d<br>s)   |
| Sig                            | nati                      | ure of a member or authorized representative   |   | <del>-</del>   | Printed or typed name of                                    | of signee  |  |   |  |
| prov<br>the o<br>to m<br>notif | isic<br>bli<br>ere<br>led | oy accept the appointment as registered ons of all statutes relative to the properties of my position as registered of the registered of the writing of this change.   | er and complete<br>ment as provide<br>Mice address, I     | performed for in C<br>hereby co<br>Corporat:           | ance of my a<br>Thapter 605<br>infirm that i<br>ion Service | wity. I further agree<br>luties, and I am fam<br>, F.S. Or, if this doc<br>the limited liability of<br>Company<br>st. Vice President | e to con<br>iliar wit<br>cument i<br>company | iply with<br>h and a<br>s being<br>has be | i the<br>ccept<br>filed<br>en  |