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K. SALY EXAMINER JUL - 3 2013

COVER LETTER

Registration Section Division of Corporations The RRP Group International LLC 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: Ritu Pahwa Name of Person The RRP Group International LLC Firm/Company 715 Crandon Blvd #306 Key Biscayne FL 33149 City/State and Zip Code m.ghanta@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: M. Ghanta Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

Enclosed is a check for the following amount:

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. Nan	ne of the limited liability company: The RRP Group Intern	national, LLC	
2. · (a) ·	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	799 Crandon Blvd Apt 1207 Key Biscayne FL 33149	- 60 6
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PO Box 490094 Key Biscayne FL 33149	THE SEE OF
8/15/11		L11000096145	TEST -
3. Date	e of filing/registration in Florida	1. Document number	
5. (a)	Registered Agent and Registered Office shown on the	ne records of the Florida Dep	t. of State:
	Registered Agent:	PAHWA, RITU R	
	Registered Office Address:	799 Crandon Blvd #1207	
		Key Biscayne FL 33149	
-	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> <u>NEW Registered Office Address:</u> (MUST BE FLORIDA STREET ADDRESS)	PAHWA, RITU R 715 Crandon Blvd #306	·
(MUSI BE FLORIDA STREET ADDRESS)		Key Biscayne	,FL 33149 ·
confirm and the liability the mer the ope	mited liability company is not organized under the land that after the change or changes are made, the Flobusiness office of the registered agent will be identify company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise rating agreement of the limited liability company. The company of a member or authorized representative of a member	orida street address of the regical. Or, in the case of a Floric	istered office da limited
RITU R P		-	
I herek comply and I an Chapte address	r typed name of signee by accept the appointment as registered agent and ag with the provisions of all statutes relative to the pro m familiar with and accept the obligations of my pos r 608, F.S. Or, if this document is being filed to men s, I hereby confirm that the limited liability company of of Registered Agent	rree to act in this capacity. I per and complete performand ition as registered agent as p ely reflect a change in the ret has been notified in writing t	further agree to ee of my duties, rovided for in gistered office of this change.

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