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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: RMC ACQUISITION, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

R MICHAEL CARLSON

Name of Person

Firm/Company

12840 MANDARIN ROAD

Address

JACKSONVILLE, FL 32223

City/State and Zip Code

rmichaelcarlson@comcast.net

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

For further information concerning this matter, please call:

Michael Carlson

,,,904<u>,</u>,910-7573

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RMC

ACQUISITIONS, LLC

•	City		Zip Code	-
	Linet Piorida si	. Florida		
New Registered Office Address:	Enter Florida s	traat addrass		
Name of New Registered Agent:				_
registered agent and/or the new registered offic	e address here.			
B. If amending the registered agent and/or registered agent and/or the new registered offic		r records, <u>enter the</u>	name of the	nev
			登場 元 登号 ω	_ `
(Mailing address MAY BE A POST OFFICE BC	<u> </u>		13 - 44	۔ ئر
Enter new mailing address, if applicable:				-!.
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				<u>-</u> ٠,
(Principal office address MUST BE A STREET)	ADDRESS)			_
Enter new principal offices address, if applicab	le:			_
The new name must be distinguishable and end with the wo				-
RMC AQUISITIONS, LLC FAR RM	10 ACQUISIT	IONS, LL	. (
A. If amending name, enter the new name of the				
This amendment is submitted to amend the follow	ing:			
Florida document number 46-1034589	·			
The Articles of Organization for this Limited Liab	ility Company were filed on 09/20	0/2012	_and assigned	

New Registered Agent's Signature, if changing Registered Agent:

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 605, 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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

	Authorized Member	A 3.3	TD 6.4.43
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			□ Remove
			Add
			Remove
			□ Add
			Comove
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· 2 ·····			Add
			□ Remove

1	
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and cannot the date this document is filed by the Florida Department of State)	(optional) be more than 90 days after
Dated May 19 2015	
Dated Wildy 15	
A/(I/I)	
Signature of a member or authorized representative	e of a member
Signature of a member or authorized representative R Michael Carlson	e of a member

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Filing Fee: \$25.00