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To:

Division of Corporations

Fax Number

: (852)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for future of annual report mailings. Enter only one email address please.\*\*

Fmail	Address:	

## LLC REGISTERED AGENT CHANGE R&J BILLING SERVICES, LLC

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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: R&J BILLING SERVICES, LLC	Limited Liability Company
	Emilied Elabirity Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Cheyenne Moseley	
Name of Person	
Legalzoom.com, Inc.	
Firm/Company	<del></del>
101 N. Brand Blvd., 10th Floor	
Address	
Glendale, CA 91203	
City/State and Zip Code	
Rjbilling58@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call:
Cheyenne Moseley	800 773-0888 ext 9724
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 an	ount:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## 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.

l. 1	Nai	me of the limited liability company: R&J BILLING	SER	VICE	S, LLC	<del></del>	<del>-</del>		
2. (t		Principal office address of fimited liability company:  (Note: MUST BE STREET ADDRESS)  4180 SOUTH PINE ISLAND ROAD	_ (	b) 418		tailing address of limite (Note: MAY BE POS UTH PINE ISLA	T OFFIC	E BOX)	
		DAVIE, FL 33328	_	DA	VIE, F	L 33328			
		06/12/2013		L130	80000	5003			
3. 5. (	<b>`</b> a\	Date of filing/registration in Florida ROBIN CRIPPEN	4.		}	Document number			
J. (	(4)	Registered Agent and Registered Office shown on the records of the	he Plori	la Dept.	of State:	:			
		Registered Office Address <u>(MUST BE FLORIDA STREET A</u> 4180 S. PINE ISLAND ROAD	DDRESS)				년 년유 근 ,	<del>18</del>	
		DAVIE, FL	3332	8				NI I	FI
(b)		UNITED STATES CORPORATION AGENTS, INC.  Enter name of NEW Registered Agent and/or NEW Registered Office address:				29 州	ED		
		13302 WINDING OAK COURT, SUITE A			·			44 :11 腳	
		NEW Registered Office Address:					•		
		TAMPA , FL	3361	2					
the age	cha nt v	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regability of the li limited	gistered compa mited Hiabil	ny, it is liability ity com	s and the business of hereby confirmed y company or as of ipany.	that the	change	(s)
<u>إس</u> يد	$\leq$	alum (1286)		ORIN	CRIF	Printed or typed name	of signee		
I he pro the to not	ere visi obi ncr ifie	by accept the appointment as registered agent and agritions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, 11 d in writing of this change.  CHEYENNE MOSELEY, ASSISTANT SECRETAR, STATES CORPORATION AGENTS, INC.			his cape of my e ter 605 in that i				ith the accept g filed been