L13000103259

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CQVER LETTER

TO: Registration Section Division of Corporations	
RAINIER BUILDERS LLC SUBJECT:	
	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 m	natter to the following:
JASON SAMPSON	
Name of Person	
VENERABLE LAW FIRM	
Firm/Company	
301 WEST PLATT STREET, NO. 657	
Address	
TAMPA, FL 33606	
City/State and Zip Code	
JSAMPSON@VENERABLE.LAW	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ease call:
JASON SAMPSON	813 284-4727
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following am	nount:
■ \$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.

!. (a)	7608 DUNBRIDGE DR, ODESSA, FL 33556	(7608 D	OUNBRIDGE DR, ODESSA, FL 33556
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 `	, 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7608 DUNBRIDGE DR		7608 D	OUNBRIDGE DR
	ODESSA, FL 33556		ODESS	SA, FL 335586
	07/19/2013	 -	L130001	03259
١.	Date of filing/registration in Florida	4.		Document number
i. (a)	SAMEER ASMAR			
· (u)	Registered Agent and Registered Office shown on the records SAMEER ASMAR	of the Florid	la Dept. of !	State:
	Registered Office Address (MUST BE FLORIDA STREE 7608 DUNBRIDGE DR	T ADDRES	<u>(S)</u>	
	ODESSA ,	33556 FL		2021 FEB
(b)	JASON SAMPSON			FE 7
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			· <u>·</u>
	JASON SAMPSON			PH 2:
	NEW Registered Office Address:			
	301 WEST PLATT STREET, NO. 657			-: -
	TAMPA,	FL_33606		
hange gent v vas/we	imited liability company is not organized under the less or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members teles of organization or the operating agreement of the control of the	ne register liability c s of the lir ne limited	ed office ompany, nited liab liability o	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.
Sima	ture of a member or authorized representative of a member	JAS	SON SAM	Printed or typed name of signee
I here	by accept the appointment as registered agent and a long of all statutes relative to the proper and comple- ligations of my position as registered agent as provide ely reflect a change in the registered office address,	gree to ac te perform led for in	t in this c sance of n Chapter (anacity I further goree to comply with the
provisi he obl o merc iotified	ely reflect a change in the registered office address, d in writing of this change.	I héreby c	onfirm th	at the limited liability company has been

FILING FEE: \$25.00