

L13000147745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

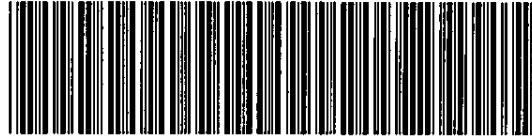
(Business Entity Name)

(Document Number)

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STATE OF ILLINOIS  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 JAN 29 PM 3:58

C.L.  
1-30-15



**CLARKCAMPBELL**  
ATTORNEYS AT LAW

CLARK, CAMPBELL,  
LANCASTER & MUNSON, P.A.

**PETER J. MUNSON**

Attorney

*pmunson@clarkcampbell-law.com*

SHAREHOLDERS

- TIMOTHY F. CAMPBELL <sup>1,3</sup>
- RONALD L. CLARK <sup>1</sup>
- JOSEPH A. GEARY
- JOHN J. LANCASTER, LL.M. <sup>2</sup>
- PETER J. MUNSON
- RALPH H. SCHOFIELD, JR.
- MICHAEL E. WORKMAN <sup>1</sup>

January 26, 2015

ASSOCIATES

- JUSTIN P. CALLAHAM, LL.M.
- KYLE H. JENSEN

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

BOARD CERTIFICATIONS

- 1 Real Estate
- 2 Tax Law
- 3 City, County & Local Government

Re: Bartow Coin Laundry, LLC name change RR Investments of Lakeland, LLC

Gentlemen:

Pursuant to your attached letter of January 21, 2015, enclosed for filing please find an original and one copy of revised Articles of Amendment to Articles of Organization. A check in the amount of \$25.00 has already been remitted for the filing fee in this regard. It would be appreciated if you would please forward confirmation of filing in the enclosed self-addressed stamped envelope.

Thank you for your assistance with this request.

Sincerely,

Lois A. Hart, Legal Assistant to  
Peter J. Munson, Esquire

LAH/s

Enclosures

RECEIVED

15 JAN 30 AM 9:47

500 South Florida Avenue • Suite 800 • Lakeland, Florida 33801 office 863-647-5337 fax 863-647-5012

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BARTOW COIN LAUNDRY, 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:

**PETER J. MUNSON, ESQUIRE**  
Name of Person  
**CLARK CAMPBELL LANCASTER & MUNSON, P.A.**  
Firm/Company  
**500 S. FLORIDA AVENUE, SUITE 800**  
Address  
**LAKELAND, FL 33801**  
City/State and Zip Code  
**r.riley@murphybusiness.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Peter J. Munson** at ( **863** ) **647-5337**  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 21, 2015

PETER J. MUNSON ESQ / CLARK CAMPBELL LANCASTER & MUNSON  
500 S. FLORIDA AVE SUITE 800  
LAKELAND, FL 33801 US

SUBJECT: BARTOW COIN LAUNDRY, LLC  
Ref. Number: L13000147745

We have received your document for BARTOW COIN LAUNDRY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L00000012149.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 415A00001210

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

15 JAN 29 PM 3: 58

BARTOW COIN LAUNDRY, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/18/2013 and assigned Florida document number L13000147745.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

RR INVESTMENTS OF LAKELAND, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_

City

Zip Code

**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**

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  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

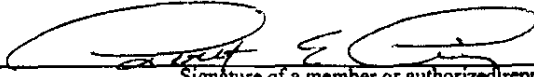
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

15 JAN 29 PM 3:58

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated January 6, 2015.



Signature of a member or authorized representative of a member

**ROBERT E. RILEY, JR., MANAGING MEMBER**

Typed or printed name of signer