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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations		
SUBJECT: RRR3 LLC Name of Limited Liability Company		
Name Of	Entited Chaomity 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:		
ROMAN SANCHEZ		
Name of Person		
RRR3 LLC		
Firm/Company		
786 GREENLEAF AVE.		
Address		
GLENCOE, IL GOOZZ		
City/State and Zip Code		
ROMANJSANCHEZOYAHOO.COM	1	
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
FWELINA LYZNIAK at	(312) (108-0314	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301	rananassee, Fiorida 32314	
Englosed is a check for the following amount:		
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

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.

1. Name of the limited liability company:RRR3_L	.LC
2. (a) 259 S. COCONUT LN	(b) 786 GREENLEAF AVE.
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
MIAMI BEACH, FL 33139	GLENCOE, IL GOOZZ
O1/16/2015 3. Date of filing/registration in Florida 5. (a) ROMN SANCHEZ	L) 5 0000 098 119 4. Document number
Registered Agent and Registered Office shown on the records of t	he Florida Dept. of State:
13302 WINDING OAK CT. A Registered Office Address (MUST BE FLORIDA STREET A	1DDRESS) 2019 OCT
TAMPA, FL .FL	22(.17
	<u>33(117</u> : = 3
(b) ROMAN SANCHEZ	Office address:
Enter name of NEW Registered Agent and/or NEW Registered	Office address:
259 S COCONUT LN. NEW Registered Office Address:	
MIAMI BEACH .FL	33139
If the limited liability company is not organized under the law the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limited lia was/were authorized by an affirmative vote of the members o the articles of organization or the operating agreement of the	the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) if the limited liability company or as otherwise provided in
Signature of a member or authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address. I knotified in writing of this change. Signature of Registered Agent	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept I for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been
Division of Corporations • P.O. B	Box 6327● Tallahassee, FL 32314

FILING FEE: \$25.00

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