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(Re	questor's Name)	
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SECREMENT OF STATE

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S. PRATHES

COVER LETTER

Registration Section Division of Corporations

TO:

INHS18 (2/14)

SUBJECT: RMC Wealth Strategie Name of Limi	ed Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.
Please return all correspondence concerning this matter t	o the following:
Robert M. Chen Name of Person	
RMC Wealth Strategies & 1	Financial Services LLC.
10171 Akenside Pri	ve
Bocg Raton FL 3 City/State and Zip Code	3428
ROBYASH & AOL, C E-mail address: (to be used for future annual report	OM notification)
For further information concerning this matter, please cal	II:
Robert M. Chen at 9	54, 608-3886 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 amount:	
\$25 Filing Fee	S55 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. N	ame of the limited liability company: RMC Wealth Strategies & Financial Services
	1017/ AKenside Drive (b) 1017/ AKenside orive
	Principal office address of limited liability company: Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	BOCG Raton FL33428 BOCG Raton FL 33428
	Tel 47015 L15000021662 Date of filing/registration in Florida 4. Document number
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Robert M. Chen
•	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	<u>્ર</u> ્ક છ
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	10171 A Renside Drive
	77420
	BOCG KAION FL SSTER
	mo = 0
(b)	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:
	, FL
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the ch	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered
agent	will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
the art	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
	Robert M. Chen
Signa	ature of a member or authorized representative of a member Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed selv reflect a change in the registered office address. I hereby confirm that the limited liability company has been d in writing of this change.