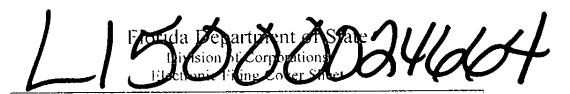
Division of Corporations



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(((1117000222088 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 720010000062 : (323)962-9600

: (323)962-3889

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**Committee LLC REGISTERED AGENT CHANGE

RIGEKARE LLC

Certificate of Status	()
Certified Copy	1
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COVER LETTER

TO: Registration Section Division of Corporations	•			
RIGEKARE LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s	s) are submitted for filing.			
Please return all correspondence concerning this matter to the follo	owing;			
Cheyenne Moseley				
Name of Person				
Legalzoom.com. Inc.				
Firm/Company				
101 N. Brand Blvd., 10th Floor				
Address				
Glendale, CA 91203				
City/State and Zip Code				
onlinefilings@legalzoom.com				
E-mail address: (to be used for future annual report notificati	oon)			
For further information concerning this matter, please call:				
Cheyenne Moseley 800	773-0888 ext 9724			
Name of Person A	rea Code & Daytime Telephone Number			
Registration Section Registr Division of Corporations Division Clifton Building P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314			
Enclosed is a check for the following amount:				
□ \$25 Filing Fee □ \$55 F	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 affice or registered agent, or both, in the State of Florida.

l. Na	me of the limited liability company: RIGEKAR	E LLC	
2. (a)	991 Counts Crest Cir	(b)	991 Counts Crest Cir
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Apopka, FL 32712		Apopka, FL 32712
	02/10/2015	 L	15000024864
3. 5. (a)	Date of filing/registration in Florida LEVEILLE, BILLY	4.	Documen; number
, (a)	Registered Agent and Registered Office shown on the record 991 Counts Crost Cir	ls of the Florida D	Documen; number 17 AUG 21 AH 11: 29
	Registered Office Address (MUST RE FLORIDA STRE	ET ADDRESS)	- A
	Apopka	, FL_32712	
(b)	UNITED STATES CORPORATION AGE	NTS, INC.	
(-)	Enter name of NEW Registered Agent and/or NEW Regist	ered Office addr	C81:
	13302 WINDING OAK COURT, SUITE A	4	
	NEW Registered Office Address:	<u> </u>	
	ТАМРА	, _{FL} 33612	
the cha agent	limited liability company is not organized under the ange or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the memberials of organization or the perping agreement of	ss of the registed ad liability con ers of the limit	ared office and the business office of the register of the register of the telephones, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
	6/////		Leveille
I here provis the ob	muc of Emonths or suborted representative of a member by accept the appointment as registered agent and ions of all statutes relative to the proper and comp ligations of my position as registered agent as pro- ely replect a change in the registered office address if in writing of this change. CHEYENNE MOSELEY, ASSISTANT SECRE STATES COMPORATION AGENTS, INC.		Printed or typed name of signee in this capacity. I further agree to comply with the nee of my duties, and I am familiar with and acceptapter 605, F.S. Or, if this document is being file infirm that the limited liability company has been
Signati	ure of Registered Agent	=	

Division of Corporations P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00