LIS 0000 44261

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

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JUL 15 2016 S. YOUNG



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: April Pagliassotti april.pagliassotti@cscglobal.com

Date: July 12, 2016

Order#: 209141/015

Re: RREMC PICK UP LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:April Pagliassotti c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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: RREMC PICK	UP LLC	
2. (a)	1800 Old Okeechobee Road, #100 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	West Palm Beach, FL 33409		
	03/11/2015		L15000044261
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Wiston, Gregg		
J. (a)	Registered Agent and Registered Office shown on the records of	fthe Florida I	Dept. of State:
	4422 Hunting Trail		TAI SF
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
			JUL 14
	Lake Worth , FI	L <u>33467</u>	P
(b)			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addr	ess:
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee , FI	L <u>32301</u>	
the cha agent v was/w the art	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the current a member or authorized representative of a member	f the registe iability com of the limit c limited lia	ered office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
provisi the obt to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change. The of Registered Agent Corporation Service Company	e performar ed for in Ch hereby con	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been ace E. Kirby, Asst. Vice President