## L150000 70657

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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TALLAHASSEE, FLORIDA

23 JUN 28 AM 8: 4

## COVER LETTER .

	rision of Corporations						
SUBJECT	RDM DAWSON ROAD. LLC						
Name of Limited Liability Company							
Dear Sir or	Madam:						
The enclose	ed Registered Agent/Registered Offi	ce Change and fe	ee(s) are submitted for filing.				
Please retu	rn all correspondence concerning thi	s matter to the fo	ollowing:				
GEORGE	W. HATCH, ESQ.						
	Name of Person		_				
GUILDA	Y LAW, P.A.						
	Firm/Company		_				
1983 CEN	TRE POINTE BLVD, SUITE 20	00					
	Address		_				
TALLAH	ASSEE, FL 32308						
	City/State and Zip Code		_				
GEORGE	@GUILDAYLAW.COM						
E-ma	il address: (to be used for future ann	ual report notific	ation)				
For further	information concerning this matter.	please call:					
GEORGE	W. HATCH, ESQ.	850 at (	224-7091				
	Name of Person	(	Area Code & Daytime Telephone Number				
Re Di P.C	ailing Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
En	closed is a check for the following	amount:					
	\$25 Filing Fee	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. 1	same of the limited liability company: RDM DAWS	ON RO	AD, LLC			
2. (a	)	(	b)			
·	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		N	failing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	8477 MIZNER CIRCLE EAST		PO BOX	47107		
	JACKSONVILLE. FL 32217		JACKSO	NVILLE, FL 32247		
	04/22/2015		L15000070	0657		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a	)					
·	Registered Agent and Registered Office shown on the records of SUNIL RAJAN	f the Floric	la Dept. of State	:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	2350 PHILLIPS ROAD, APT. 5-211					
	TALLAHASSEE	L 32308		<b>202:</b> TĂL		
(b				PIL 2023 JUN 28 TĂLLĂĤASS		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			28 L		
	GEORGE W. HATCH, ESQ.			A C		
	NEW Registered Office Address:			B AH 8: 48 SEE, FLORIDA		
	1983 CENTRE POINTE BLVD, SUITE 200					
	TALLAHASSEE F	L_32308				
changagent was/the provident of the mentification o	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liver authorized by an affirmative vote of the members liele of organization of the operating agreement of the manufacture of a member of authorized representative of a member reby accept the appointment as registered agent and against of all statutes relative to the proper and complete bligations of my position as registered agent as provided reflect a change in the registered office address, I see in writing of this change.	e registeriability cof the linerial control in the lin	red office and ompany, it is nited liability complete liability complete in this capa	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  Printed or typed name of signee  city. I further agree to comply with the outes, and I am familiar with and accept		