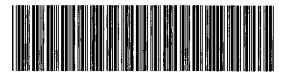
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2018 OCT 19 PM 12: 31
SECRETARY OF STATE
AHASSEE, FLORIDA

K.SALY EXAMINER OCT 222015

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of section's 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.	Na	ame of the limited liability company: RD PRODUCT	ΓIVE	INVESTME	ENT, LLC			
2.	(a)		_ (	(b)				
		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		N	-	limited liability co		
		3549 WEST 89TH PLACE	3549 WEST 89TH PLACE					
		HIALEAH, FL 33018	_	HIALEAH, FL 33018				
		09/23/2015		L1500016	52209			
3.		Date of filing/registration in Florida	4.		Document nun	nber		
5.	(a)	RUBEN D PATINO						
٥,	(u)	Registered Agent and Registered Office shown on the records of the	ie Flori	da Dept. of State	- >:			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
		8020 NW 60TH STREET BLDG B SUITE P				F. 28		
		MIAMI , FL 3	33166	3		2015 OCT SECRET	7	
	(b)	RUBEN D PATINO				FILED  15 OCT 19 PM 12: 31  ECRETARY OF STATE  LLAHASSEE, FLORID		
		Enter name of NEW Registered Agent and/or NEW Registered (		ddress:				
		NEW Registered Office Address:	• •	· · · ·	•	سب السا		
		3549 WEST 89TH PLACE						
		HIALEAH , FL	33018	3				
the ag wa	e cha ent v is/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he reg pility of the li	istered office company, it is mited liability	e and the busine s hereby confirm y company or a	ess office of the med that the ch	registered ange(s)	
		Nuber D. Polino	RI	JBEN D PA	ATINO			
	•	ture of a member or authorized representative of a member	a to a	at in this agn	Printed or typed	•	lu with the	
pro the to	ovisi obl. mere	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to a perfori for in ereby	nance of my o Chapter 605 confirm that i	duties, and I an F.S. Or, if this the limited liab	agree to comp n familiar with is document is i ility company h	and accept being filed as been	
Si	gnatu	re of Registered Agent						