

L16000033437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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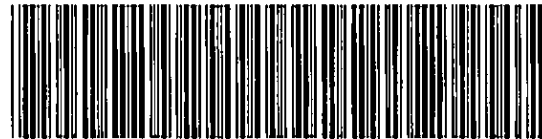
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2018 OCT -1 PM 1:20

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D. BRUCE  
OCT 08 2018

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TRIPLE R RANCHES 4, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RONALD R. RICHMOND  
Name of Person

\_\_\_\_\_  
Firm/Company

4425 MEANDERING Way, STE 420  
Address

TALLAHASSEE, FL 32308  
City/State and Zip Code

ronaldrichmond@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person

at ( 850 ) 545-5964  
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

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE FLORIDA

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

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: TRIPLE R RANCHES 4, LLC
2. (a) Principal office address of limited liability company: 2828 REMINGTON GREEN CIRCLE  
(Note: **MUST BE STREET ADDRESS**) TALLAHASSEE, FL 32308
- (b) Mailing address of limited liability company: 2828 REMINGTON GREEN CIRCLE  
(Note: **MAY BE POST OFFICE BOX**) TALLAHASSEE, FL 32308
- 2-18-16
3. Date of filing/registration in Florida
4. Document number L16000033439

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

RODOLFO R. RICHMOND

Registered Office Address:

1294 MILLSTREAM ROAD  
TALLAHASSEE, FL 32312

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

NEW Registered Office Address:  
(**MUST BE FLORIDA STREET ADDRESS**)

2828 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change 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) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Rodolfo R. Richmond  
Signature of a member or authorized representative of a member

RODOLFO R. RICHMOND  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Rodolfo R. Richmond  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00