UDDÓ	14/6/6		
(Requestor's Name) (Address) (Address)	900289303129		
(City/State/Zip/Phone #)	FILED TALLAHASSEE. FLORIDA 16 AUG 23 AM 8: 00		
Certified Copies Certificates of Status	RECEIVED DEPARTMENT OF STATE 16 AUG 23 AH IO: 50		
Office Use Only	AUG 2 4 2016		

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S. YOUNG

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE : 254494

7977419

16 AUG 23

AM 8: 00

AUTHORIZATION :

COST LIMIT

ACCOUNT NO. : I2000000195

i,

: Sprelle man : \$25.00

ORDER DATE : August 15, 2016

- ORDER TIME : 9:46 AM
- ORDER NO. : 254494-005
- CUSTOMER NO: 7977419

CHANGE OF AGENT

NAME: WAM BUSINESS SOLUTIONS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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. Name of the limited liability company: WAM BUSINESS SOLUTIONS, LLC

2. (a)	7700 Congress Avenue, Suite 3115	(b)	7700 Congress Avenue, Suite 3115		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company [*] (Note: MAY BE POST OFFICE BOX)		
	Boca Raton, FL 33487		Boca Raton, FL 33487		
	07/28/2016		L16000141616		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	RDMS Holdings, LLC				
	Registered Agent and Registered Office shown on the records of	f the Florida I	Dept. of State:		
	7700 Congress Ave, 3115				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS		Ās	
			AUG	5ê.	
	Boca Raton, Fl	L <u>33487</u>	23	037 -	
			A A A A A A A A A A A A A A A A A A A	<u>no</u> n	
(b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	100			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	u Omee add		OP N	
	1201 Hays Street		0	©rti >>	
	NEW Registered Office Address;		<u> </u>		
	Tallahassee	L 32301			
the cha agent w was/we	mited liability company is not organized under the la nge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited l re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regist iability cor of the limit	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in	ed	
		Bryai	n Rudnick		
-	ure of a member or authorized representative of a member		Printed or typed name of signee		
I herel provisi the obl. to mere notified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete pations of my position as registered agent as provide by reflect a change in the registered office address, I I in writing of this change.	pree to act i e performa ed for in Ci hereby coi		e pt d	
	UDELIV		Courtney Williams		
Signatu	re of Registered Agent Corporation Service Company	BY:	Asst. Vice President		
	Division of Corporations P.O. FILING F	Box 6327• FEE: \$25.0			

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