L18000125866		
(Requestor's Name) (Address) (Address)	700376732937	
(City/State/Zip/Phone #)	11/19/21-+01015-+001 **25.00	
PICK-UP WAIT MAIL     (Business Entity Name)     (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	2021 ROY 19 PM 2: 4 3 . MARSEESTATE MINSSEE, FL	
Office Use Only	Y SULKER	

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DEC 09 2021

## COVER LETTER

TO: **Registration Section Division of Corporations** 

RTH Estates, LLC Name of Limited Liability Company SUBJECT:

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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:

Jessica Lobba-Williams Name of Person

RJU Estater, LLC Firm/Company

163 Rock Springs Nod, # 318 Address

Apopka, FU 32712 City/State and Zip Code

Jessice ( Uestates. Com P-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessich Lobbart- Williams at (4.07) 457.9955 Name of Person Area Code & Daytime Telephone Number

Mailing Address: **Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

**Registration Section Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Enclosed is a check for the following amount:

\$25 Filing Fee

□ \$55 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.

I. Name of the limited liability company: 170 Estates LC			
2. (a)		(b)	
	Principal office address of limited liability company ( <u>Note: MUST BE STREET ADDRESS</u> )		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1631 Rock springs rd	_[[3	Nock springs Rd
	Apopto, EC 32212		4 318 Apople PC 32712
	<u> </u>		L18000125866
3.	Date of filing/registration in Florida	-1.	Document number
5. (a)	RJU Estates		
	Registered Agent and Registered Office shown on the record	ds of the Florida Dept, of	State:
	Registered Office Address (MUST BE FLORIDA STR	<u>EET ADDRESS)</u>	
	3574 stathan Drive		- 21
	Apopka	.FL_32712	
(h)	Dessice	Labbon	-Williams PH 2 4
	1631 Rock Springs Rd NEW Registered Office Address:		
	# 318		
	_ApopKA	.FL 32712	
agent w was/we	mited liability company is not organized under th or changes are made, the Florida street address of fill be identical. Or, in the case of a Florida limite re authorized by an affirmative vote of the member cles of organization or the operating agreement of	t the registered office ed liability company, ers of the limited liab	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in
	re of a member or authorized representative of a member	Jessie	CA Labban Williams Printed or typed name of signee
-provisio -the-obli -to-mere	y accept the appointment as registered agent and ons of all statutes relative to the proper and comp gations of my position as registered agent as prov by reflect a change in the registered office addres. 'in writing of this change.	Comment of the state	in the first of the second

**በ ነ** ነ ぃ tre of Registered Agent S

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Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00