119000153819

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



400380789174

01/31/22-+01015--002 ++25.00

TALLAHASSEF SIATI

1 AKCKIS

FEB 1 1 LOTT.

COVER LETTER

	sistration Section ision of Corporations		
SUBJECT:	RIVER RANCH RENTAL I, LLC		
SUBJECT.		imited	Liability Company
Dear Sir or l	Madam:		
The enclose	d Registered Agent/Registered Office Cha	ange an	nd fee(s) are submitted for filing.
Please return	n all correspondence concerning this matt	er to th	e following:
Alex Rosenti	nal		
	Name of Person		
Rosenthal La	aw Group		
-	Firm/Company		
2115 North (Commerce Parkway		
	Address		
Weston, FL	33326		
·	City/State and Zip Code		
frank@frione	c.net		
E-mai	l address: (to be used for future annual rep	ort not	ification)
For further i	information concerning this matter, please	call:	
Alex Rosenti	hal at (954	3849200
	Name of Person		Area Code & Daytime Telephone Number
Reg Div P.C	gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	closed is a check for the following amou	nt:	
Δ_i	\$25 Filing Fee		\$55 Filing Fee & Certified Copy
INHS18 (2/1	4)		

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.

. (a)		(b) _				
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limi	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	06/10/2019		9000153819			
i.	Date of filing/registration in Florida	4.	Document number			
	Spencer Staget	1.				
5. (a)	Registered Agent and Registered Office shown on the records	pt. of State:				
	Registered Office Address (MUST BE FLORIDA STREE 1600 S. Dixie Highway, Suite 300	ET ADDRESS)				
	Boca Raton	FL_33432			~	
<i>a</i> \	Alex P. Rosenthal, Esq.			SEGR TAL	022 J	****
(b)	Enter name of NEW Registered Agent and/or NEW Register	27 :	LAHASSE	2022 JAN 3 I		
	NEW Registered Office Address:			SSE	꾶	
	2115 North Commerce Parkway			STAT E, FL	2: 2	C
	Weston	FI 33326		fra.	•	
hang gent vas/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited yere authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street and the street are the street and the street and the street are the street are the street and the street are the street and the street are the stre	the registered of I liability comp rs of the limited the limited liab	office and the business office and, it is hereby confirmed d liability company or as ot ility company.	e of the re that the c herwise p	egister hange	ed (s)
Sign	ature of a member or authorized representative of a member		Frunk Frion	of signee		
I hero provis he ob o me	eby accept the appointment as registered agent and cions of all statutes relative to the proper and completing at the proper and completing to the proper and completing as of my position as registered agent as proving the property reflect a change in the registered office address, at in writing of this change.	agree to act in ete performanc ided for in Cha , I hereby confi	this capacity. I further agr e of my duties, and I am far pter 605, F.S. Or, if this do rm that the limited liability	ee to com niliar with cument is company	ply with and of being has be	h the accep filed een

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