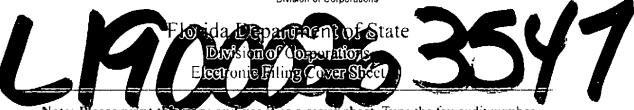
3/26/2021

Division of Corporations



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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ						
	Nam	e of Limited Liab	oility Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offi	ce Change and fo	e(s) are submitted for filing.			
Please	return all correspondence concerning thi	s matter to the fo	llowing:			
Chey	renne Moseley					
	Name of Person		-			
Lega	Izoom.com, Inc.					
_	Firm/Company		-			
101 !	N. Brand Blvd., 10th Floor		_			
	Address					
Glen	dale, CA 91203		_			
	City/State and Zip Code		-			
	aylor5155@gmail.com					
<u> </u>	:-mail address: (to be used for future ann	ual report notific	ation)			
For fu	rther information concerning this matter,	please call:				
Chey	enne Moseley	800 at (773-0888 ext 9724			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 ahassee, Florida 32314			
	Enclosed is a check for the following amount:					
	□ \$25 Filing Fee	☑ \$55	Filing Fee & Certified Copy			

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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.	Na	me of the limited liability company: RCT HOLDING			
2	(a)	13040 SABAL CHASE	((Ъ)	13040 SABAL CHASE
-	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- `	,	Mailing address of limited liability company: (Note: MAY RE POST OFFICE ROX)
		WEST PALM BEACH	_		WEST PALM BEACH
		FL 33418	_		FL 33418
		10/21/2019		Ĺ	L19000263547
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	United States Corporation Agents, Inc.			
,	(-)	Registered Agent and Registered Office shown on the records of the 5575 S. Semoran Blvd.	ne l'Iloria	da D	a Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET A) 36	DORES	S	<u></u>
		Orlando	3282	2	
(b	(b)	Richard Taylor Enter name of NEW Registered Agent and/or NEW Registered (Office a	ddr	dress:
		NEW Registered Office Address:			
		WEST PALM BEACH , FL	3341	8	
the age	cha ent v e/w/	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 icles of organization or the operating agreement of the liabere authorized.	ine reg bility (Lihe li	gisti con mit	ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
	igna	ture of a member or authorized representative of a member			Printed or typed name of signee
pro the to no	iere ovisi obl mer tifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete i ligations of my position as registered agent as provided ely reflect a change in the registered office address. I have	e to a perfori for in erchy	ct i nai Cl cor	t in this capacity. I further agree to comply with the sance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has heen
	•	re of Registered Agent d Taylor.			

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