

L20000 124032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

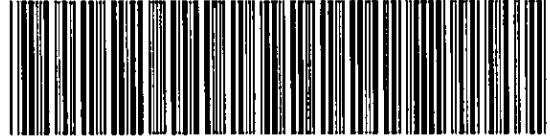
(Business Entity Name)

(Document Number)

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2020 JUN 17 AM 7:30

FILED

JUL 25 2020

S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RBPro, 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:

Edmund A. Milford

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

Milford Consulting, LLC

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

4327 S. Hwy 27, Suite 419

\_\_\_\_\_  
Address

Clermont, FL 34711

\_\_\_\_\_  
City/State and Zip Code

ed.milford@milfordtaxandaccounting.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edmund Milford

352

901-2573

at ( )

\_\_\_\_\_  
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:

☐ \$5 Filing Fee

☒ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

# 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: RBPro, LLC

2. (a) RYAN BURR (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

8402 TIBET BUTLER DRIVE

WINDERMERE, FL 34786

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

8402 TIBET BUTLER DRIVE

WINDERMERE, FL 34786

05/07/2020

L20000124032

3. Date of filing/registration in Florida

4. Document number

5. (a) LEGALCORP SOLUTIONS, LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

LEGALCORP SOLUTIONS, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3440 W HOLLYWOOD BLVD. SUITE 415

HOLLYWOOD

FL 33021

(b) Milford Consulting, LLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

Milford Consulting, LLC

NEW Registered Office Address:

4327 S. Hwy 27, Suite 419

Clermont

FL 34711

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.

Signature of a member or authorized representative of a member

Ryan Burr

Printed or typed name of signer

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.

Signature of Registered Agent

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