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COVER LETTER

Division of Corporations		
SUBJECT: R and L Housing LLC		
	of Limited Li	ability 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 r	natter to the	following:
Anna K Ross		
Name of Person		
R and L Housing LLC		
Firm/Company	_	
570 West End Dr.		
Address		
Charlotte NC 28208		
City/State and Zip Code		
ar.homes2020@gmail.com		
E-mail address: (to be used for future annua	l report notif	ication)
For further information concerning this matter, ple	ease call:	
Anna K Ross	at (818	486-1463
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	Re Di P.C	gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314
Enclosed is a check for the following ar	nount:	
☑ \$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.

	me of the limited liability company:			b) 570 West End Dr.
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	((b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Charlotte NC 28208			Charlotte NC 28208
	03/31/21		L	L21000149845
	Date of filing/registration in Florida	_ 4.		Document number
(a)	Anna K Ross			
(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta		a Dept. of State:	
	570 West End Dr.			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE:	55)	8 30 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Charlotte , F	28208		
(b)	Registered Agents Inc			OF A
` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	dd	
	7901 4th St N			L'IE
	NEW Registered Office Address:			
	STE 300			
	St. Petersburg	33702		
cha nt v s/we	imited liability company is not organized under the launge or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited level authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the reg iability (of the li	gist cor mi	istered office and the business office of the registe ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in

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.

- Assistant Secretary

Signature of Registered Agent

David Roberts