

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L2200014374517

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000143745 3)))



H220001437453ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I2016000017
Phone : (855)498-5500
Fax Number : (800)432-3622

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RMW STR 2022 LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

2022 APR 20 PM 4:31

2022 APR 20 PM 4:30

APPROVED
AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

H22000143745

SUBJECT: RMW STR 2022 LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

Capital Services - Corporate Filing Team

Firm/Company

315 East Park Avenue 2nd Floor

Address

Tallahassee, FL 32301

City/State and Zip Code

bob@rmwholdings.com

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

For further information concerning this matter, please call:

Name of Person at (855) 498-5500
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
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

H22000143745

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: RMW STR 2022 LLC

SECOND: The Florida Document number of the limited liability company is: L22000164517

THIRD: Document to be corrected is: ARTICLES OF ORGANIZATION

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

X Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

IN ARTICLES II, III AND IV AN INCORRECT ZIP CODE WAS USED.

THE CORRECT ZIP CODE IS 33305 NOT 33308.

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

[Blank lines for signature correction details]

OR

The electronic transmission of the record was defective.

/s/ ROBERT M. WHITE, JR.

4/20/2022

Signature of Authorized Representative

Date

2022 APR 20 PM 4:30 APPROVED AND FILED

Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

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.

Registered Agent's Signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

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