Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 REGISTERED AGENT CHANGE RNR DESTINATIONS, LLC

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JUL 0 7 2023 < Brumbley

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. N	ame of the limited liability company: RNR DESTIN	IATIO	NS, LLC			
2. (a)	Principal office address of limited Hability company: (Note: MUST BE STREET ADDRESS)	(b)				
3.	01/19/2023 Date of filing/registration in Florida	- - 4.	L230000	35769 Document number		
E (n)	BARKSDALE, WILLIAM S, IV					
	Registered Agent and Registered Office shown on the records of the Agent Agent and Registered Office Address [MUST BE FLORIDA STREET A]	he Florid	a Dept. of State	r: -		
	NICEVILLE . FL	3257	8	•		
(b)	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Company and New Registered Company and New Registered Company and New Registered Office Address: STE 300		<u> </u>	MUMINSSEE FLORID	2023 JUL -7 PM 5: 48	<u>C</u>
	St. Petersburg , FL	3370	2			
the cha agent was/w was/w the art Signa I here provise the obit to mer notifie	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liance of a member or authorized representative of a member by accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change. David Roberts - Assistant Secretary are of Registered Agent	the reg bility c I the lir limited ————————————————————————————————————	istered office ompany, it is nited liability liability com	e and the business offices hereby confirmed that y company or as other apany. Robin Jones Printed or typed name of se	te of th t the ch wise pr	e registered nange(s) ovided in