L9900005603

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #	#)
PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Name	e)
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(Do	ocument Number)	
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Certified Copies	Certificates o	of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

S. HAWKES

AUG _ 4 2009

EXAMINER

COVER LETTER

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608,416 or 608 liability company submits the following statement in ord agent, or both, in the State of Florida.	.508, Florida Statutes, the undersigned limited der to change its registered office or registered
1. Name of the limited liability company: RRH MAN	IAGEMENT&OPERATING COLLL.
2. (a) Principal office address of limited liability compa	ny:
(Note: MUST BE STREET ADDRESS)	23428 COUNTRY CLUB DRIVE FAST
(b) Mailing address of limited liability company:	BOCA RATON, FL., 33428
(Note: MAY BE POST OFFICE BOX)	SAME AS ABOVE
SEPTEMBER 7, 1999 3. Date of filing/registration in Florida	L9900005603 4. Document number
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:
Registered Agent:	MARK A. MILLER
Registered Office Address:	8134 THAMES BLVD. BOCA RATON, FL., 33433
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent:	EW Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	23428 COUNTRY CLUB DRIVE EAST
	BOCA RATON ,FL 33428
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company.	Florida street address of the registered office ntical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote erwise provided in the articles of organization
Signature of a member or authorized representative of a member	
MARK A. MILLER Printed or typed name of signee	,
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability compa	agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in herely reflect a change in the registered office my has been notified in writing of this change.

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

Signature of Registered Agent