M0100000 2253

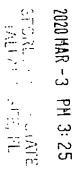
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	

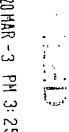




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COVER LETTER

TO: Registration Section Division of Corporations	• .
ROS NO. 18 LLC SUBJECT:	· ਰ
Name of Lim	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
LYNNE M MILLER	
Name of Person	
REALTY MANAGEMENT CONSULTANTS INC	
Firm/Company	
4811 S 76TH ST #211	
Address	
GREENFIELD, WI 53220	
City/State and Zip Code	
LMILLER@RMC-INC.COM	
E-mail address: (to be used for future annual repor	rt notification)
For further information concerning this matter, please c	all:
LYNNE M MILLER 41 at (4 281-6000
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	:
□ \$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.

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE A 4811 S 76TH ST #211 GREENFIELD, WI 53220 2/11/2020 M01000002253 Date of filing/registration in Florida Registered Agent and Registered Office shown on the records of the Florida Dept. of State: SUSAN L RIORDAN Registered Office Address: 9754 BENT GRASS BEND NAPLES FL 34108 (b) REALTY MANAGEMENT CONSULTANTS INC Enter name of NEW Registered Agent and/or NEW Registered Office address: 2780 E FOWLER AVE #2004 TAMPA FL 33612 The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed tha hange or changes are made, the Florida street address of the registered office and the business office of the registent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed tha thange or changes are made, the Florida street address of the registered office and the business office of the registent will be identical. Or, in the case of a Florida limited liability company or as otherwise prove a carticles of organization or the operating agreement of the limited liability company.	. (a)			(b)	
4811 S 76TH ST #211 GREENFIELD, WI 53220 2/11/2020 Date of filing/registration in Florida 4. Document number (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: SUSAN I. RIORDAN Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 9754 BENT GRASS BEND NAPLES FL 34108 (b) REALTY MANAGEMENT CONSULTANTS INC Enter name of NEW Registered Agent and/or NEW Registered Office address: 2780 E FOWLER AVE #2004 TAMPA FL 33612 The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that many or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change or changes are made, and firmative vote of the members of the limited liability company or as otherwise provarieties of organization or the operating agreement of the limited liability company.		Principal office address of limited liability company:			Mailing address of limited liability company:
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Nithal M. Mulli	L	ure of a member or authorized representative of a member	LY	NNE M MILI	LER

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.

M. Kille Lut me Signature of Registered Agent