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(Re	questor's Name)	·
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
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COVER LETTER

	stration Section sion of Corporations				
SUBJECT:	RLA Holdings, LLC				
	Nan	ne of Limited I	Liability Company		
Dear Sir or M	ladam:				
The enclosed	Registered Agent/Registered Off	iaa Chanaa an	d fac(a) and submitted for Clin		
				g.	
Please return	all correspondence concerning th	is matter to the	e following:		
Observe Alex					
Shasta Alp			<u></u>		
	Name of Person				
Thorp Purd	y Jewett et al				
	Firm/Company	<u></u>		2016 A	4
1011 Harlo	w Road, Suite 300			AUG 26 RETARY AHASSE	
	Address				
Springfield,	OR 97477			S72/18	C
	City/State and Zip Code	<u></u>		A	
salpers@th	orp-purdy.com				
E-mail a	address: (to be used for future ann	ual report noti	fication)		
For further in	formation concerning this matter,	please call:			
Shasta Alpe	ers	541 at (747-3354	,	
	Name of Person	u \	Area Code & Daytime Tele	ephone Number	
Regis Divisi Clifto 2661	tration Section fon of Corporations n Building Executive Center Circle hassee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 illahassee, Florida 32314		
Enclo	sed is a check for the following	amount:			
☑ \$2.	5 Filing Fee	□ \$	55 Filing Fee & Certified Cop	ру	

INHS18 (2/14)

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.

			(b)			
	Principal office address of limited liability company: (Note: MUST RESTREET ADDRESS)			Mailing address of lin	nited liability	company:
	410 Chambers Street		410 (Chambers Street	<u>OST OFFICE</u>	<u>. nya</u> y
		_				
	Eugene, OR 97402	_	Euge	ne, OR 97402		
	09/09/2002		M0200	00002350		
	Date of filing/registration in Florida	4.		Document numb	er	
(a)	CT Corporation System					
,	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of	State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	221	- 		
	1200 South Pine Island Road					
	Plantation , Fi	3332	4	_		
		·	· <u>·</u>	<u> </u>	Ħ.	21
b)	InCorp Services, Inc.					2016 AUG
	Enter name of NEW Registered Agent and/or NEW Registeres	l Office n	dil <u>ress</u> :		LAHA	AUG
					တ္တက	26
	NEW Registered Office Address:				in co	>
	17888 67th Court North				FLOS	<i>ج</i> ۔
				<u> </u>	LOND.	Ω.
	Loxahatchee	33470	•		36	ഗ

FILING FEE: \$25.00