M100000113a

(Requestor's Name)			
	(Address)			
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	(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
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FILED 2022 JUN 23 PM 1: 26 SECRETARY OF STATE CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 676509 8331866
AUTHORIZATION: Spellikeran
COST LIMIT : \$ 25.00
ORDER DATE: May 16, 2022
ORDER TIME : 9:12 AM
ORDER NO. : 676509-017
CUSTOMER NO: 8331866
CHANGE OF AGENT
NAME: RT ELKTON, LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CONTACT PERSON: Alexxis Weiland
EXAMINER'S INITIALS:

A Committee of the Comm

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	lame of the limited liability company:RT ELKTON,	LLC			
2. (a)	90 Park Avenue, 32nd Floor		(b)		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(u) <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	New York, NY 10016				<u></u>
	10/26/2010		M100000	04732	
 (a) 	Date of filing/registration in Florida NRAI Services, Inc.	4.		Document number	_
3. (u	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road	of the Florid	da Dept. of Sta	ate:	
	Registered Office Address (MUST BE FLORIDA STREET	<u> ADDRES</u>	<u>(S)</u>		
	Plantation, F	L_33324	4	_	
(b)			ddress:	2022 JUH SECRETA FALLAHA	<u> </u>
	Corporation Service Company			H 23 P	_
	NEW Registered Office Address:				Г
	1201 Hays Street			_	_
	Tallahassee, F.	L_32301		- 26	
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members celes of organization or the operating agreement of the	e register iability co of the lin	ed office an ompany, it is nited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	3
/s/ Ji	Il Cilmi	Jill	Cilmi, Autho	prized Person	
•	ture of a member or authorized representative of a member			Printed or typed name of signee	_
I here provisi the obl to mer	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I	ree to act perform d for in (hereby c	t in this cape ance of my c Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am Jamiliar with and accept i, F.S. Or, if this document is being filed the limited liability company has been	
notifie	Lin writing of this charge.	orporatio	on Service	Company	
Signatu	re of Registered Agent	mi M. C	asper, Assi	t. Vice President	