M12000001476

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DIVISION OF CHAPMRATIONS

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COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	Rymari Properties, LLC				
Name of Limited Liability Company					
Dear Sir	or Madam:				
The encl	osed Registered Agent/Registered Office	Char	nge and	fee(s) are submitted for filing.	
Please re	eturn all correspondence concerning this n	nattei	r to the f	Collowing:	
Natash	na Ramsingh, Esq.				
	Name of Person	-		_	
Parekh	n Ramsingh, P.A.				
	Firm/Company			_	
679 SV	V Treasure Cove				
	Address			_	
Port Sa	aint Lucie, FL 34986				
	City/State and Zip Code				
rymari	pllc06@gmail.com				
E-1	mail address: (to be used for future annual	repo	ort notifi	cation)	
For furth	ner information concerning this matter, ple	ease	call:		
Natash	na Ramsingh, Esq.	at (_	772	924-8888	
	Name of Person	(_	<u> </u>	Area Code & Daytime Telephone Number	
] ! •	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:					
Į	□ \$25 Filing Fee		2 \$5	5 Filing Fee & Certified Copy	
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

1.	Na	me of the limited liability company: Rymari Prop	erties, L	LC	
2.		Principal office address of limited liability company:)	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		1610 N. 23rd Street		P.O. Box 12717	
		Fort Pierce, FL 34950	<u> </u>	Miami, FL 33101	
		March 14, 2012		M12000001476	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)				
	(4)	Registered Agent and Registered Office shown on the records of Howard S. Miller, P.A.	the Florida	Dept. of State:	
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2	
		10000 Stirling Road, Suite 1			
		Cooper City , FI	33330	14 JUL 16	
1	(b)				
				dress: AH 11: 25	
		Natasha Ramsingh, Esq.			
		NEW Registered Office Address:		un K	
		679 SW Treasure Cove			
		Port Saint Lucie , FI	_34986		
the age was	cha nt v s/we	mited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the registiability control of the limited l	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in iability company.	
17	ال	- she marter water	Roo	dney M. McMillian, Manager	
- /		ure of a member or anthorized representative of a member		Printed or typed name of signee	
pro the to i	visi obl veri	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, I is now ting at the change.	ree to act e perform ed for in (hereby co	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been	
1	(la)	I'm writing of the change Lawry Lawre of Registered Agent			

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