

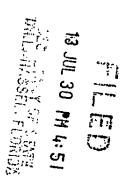
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COVER LETTER

TO: Registration Section **Division of Corporations** RMM FM, LLC **SUBJECT:** Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Tim Lynch Name of Person Hemmer DeFrank PLLC Firm/Company 250 Grandview Drive, Suite 500 Address Ft. Mitchell, KY 41017 City/State and Zip Code tlynch@hemmerlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tim Lynch Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ■ \$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

Name of limited liability company as it appears on the records of the Florida Depar State: RMM FM, LLC	tment of	ड इ
2. Jurisdiction of its organization: Kentucky	77« 77«	30 PH
3. Date authorized to do business in Florida:07/17/2013	. F COM	PH 4:51
SECTION II (4-7 complete only the applicable changes)	3.5	,
4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?07/22/2013	!	
5. New name of the limited liability company: RMM Ft. Myers, LLC (must end with "Limited Liability Company, ""L.L.C.		_
(must end with "Limited Liability Company, ""L.L.C.	.," or "LLC.	")
(If name unavailable, enter alternate name adopted for the purpose of transacting busing Florida and attach a copy of the written consent of the managers or managing members the alternate name. The alternate name must end with "Limited Liability Company," "or "LLC.") 6. If the amendment changes the period of duration, indicate new period of duration:	s adopting	25
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction	n:	
8. If the amendment corrects any false statement, indicate the statement being correction:	cted and	the
9. Attached is an original certificate, no more than 90 days old, evidencing the aforem amendment(s), duly authenticated by the official having custody of records in the the law of which this entity is organized Signature of a member of the authorized representative of a member		— on under
Donald M. Hemmer - Secretary		

Typed or printed name of signee

Filing Fee: \$25.00



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mstratton AMD

Allson Lundergan Grimes Kentucky Secretary of State Received and Filed: 7/22/2013 12:19 PM Fee Receipt: \$40.00

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings			3.1 m	
Business Filings	1	Amendment	### \$300	LLA T
PO Box 718	(Limited Liab	ility Compaпу)	44-	
Frankfort, KY 40602 (502) 564-3490			ر مساد ما ما	
www.sos.ky.gov			بر. بريد	् म्ह
			<u> </u>	<u> </u>
Pursuant to the provisions of KI for that purpose, submits the fo		apter 275, the undersigned applicar	nt applies to amend ar	ticles and,
1. Name of the limited liability on RMM FM, LLC	company on record w	vith the Office of the Secretary of Sta	ate is:	
(Name must be identical to the name	on record with the Sec	retary of State.)		
2. The text of each amendmen	t adopted:			
"Article I: The name of	of the company	y is RMM Ft. Myers, LLC	H	
				<u> </u>
·				
				
		47 2042		
3. The date of adoption of each	amendment was	uly 17, 2013	<u> </u>	·
4. Mark the appropriate line in t	he following stateme	int for the adoption of the amendme	nt (check only one option):
The amendment(s) was	s/were duly adopted	by the managersor members	ers in accon	dance with
the articles of organizat	tion, the operating ac	greement of the limited liability comp	any, or this chapter.	
5. This amendment will be effect	ctive upon filing, unle	ss a delayed effective date and/or ti	me is provided. The	effective date
		he application is filed. The date and	I/or time is	
				offective date Vor time)
A 77 / 17 1 / 1 / 1			🗸	,
6. The individual signing these	ancies of amendme	ent is a (check only one): Member	or ManagerV	- •
vial.	11			
We declare under perfetty of per	rjury under the laws	of the state of Kentucky that the for	egoing is true and con	rect.
Dr4////	cen ell	Donald M. Hemmer	Secretary	07/17/2013
Signature of Member, Mahager or A	uthorized Party	Printed Name	Title	Date
Signature of Member, Manager or A	uthorized Party	Printed Name	Title	Date