M15000004441

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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.

2. (a)		(b)	
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change	_	No Ch	ange
	June 4, 2015		·	M15000004441
	Date of filing/registration in Florida	4.		Document number
. (a)	Viola, Mike			
()	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of St	ate:
	100 N. Cherry Street, #520			
	Registered Office Address (MUST BE FLORIDA STREET -	(DDRESS	2	2024 J
	Winston-Salem , FL	27101		2024, 1511, 10
(b)	COGENCY GLOBAL INC.) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	
	115 North Calhoun St., Suite 4			
	NEW Registered Office Address:			
	Tallahassee , FL	32301		_
he cha gent v vas/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- tere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ibility co f the lim	stered offi impany, it ited liabil	ice and the business office of the registere t is hereby confirmed that the change(s) lity company or as otherwise provided in
/s/ Mi	ike Viola	Mike	Viola	•
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
rovisi he obl o mere	by accept the appointment as registered agent and agr ins of all statutes relative to the proper and complete igations of my position as registered agent as provide ily reflect a change in the registered office address. I h I in writing of this change.	ee to act perform I for in C tereby co	in this ca ance of m Thapter 60 onfirm the	spacity. I further agree to comply with the v duties, and I am familiar with and accep 05, F.S. Or, if this document is being filed at the limited liability company has been
-	mothy Mayville			

Timothy Mayville, Assistant Secretary

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

INHS18 (2/14)

Signature of Registered Agent



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:(07/09/2024				
	Patrice Rush				
	2411467				
		RUITY HR IV, LLC			
☐ Articles	s of Incorporation/Authoriza	tion to Transact Business			
✓ Change of Agent ☐ Reinstatement					
Conversion					
☐ Merger ☐ Dissolution/Withdrawal					
	us Name				
Authorized Ar					
Signaturo	(Part//				