M16000016264

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

Account#: 120000000088

Date:	12/11/2018			
Name:	Merritt Walker	 		
	1021853			
	ə:	RH FL, LLC		
☐ Artic	les of Incorporation/Authoriz			
Ame	ndment			
☐ Rein	statement			
☐ Conv	version			
☐ Merg	ger			
☐ Dissolution/Withdrawal				
☐ Fictit	ious Name			
☐ Othe	r			
Authorized ,	Amount: \$25			
Signature: _	ww			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: RH FL, LLC	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	2250 NW FLANDERS ST, STE. G2
(11001 111 00 1 111 0 1 1 1 1 1 1 1 1 1	Portland, OR 97210
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2250 NW FLANDERS ST, STE. G2
(1.000)	Portland, OR 97210
December 19, 2016	M16000010264
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	Corporation Service Company
Registered Office Address:	1201 Hays Street
	Tallahassee, FL 32301-2525
(b) Enter name of NEW Registered Agent and/or NEV	V Registered Office address:
NEW Registered Agent:	COGENCY GLOBAL INC.
NEW Registered Office Address:	115 North Calhoun St., Suite 4
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the FI and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
Signature of a member or authorized representative of a member	- 20 20 20
•	CRE AH
Mike Parthagerathy Vice President Printed or typed name of signee	- AND TO 7
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision of all statutes relative to the province and I am familiar with and accept the obligations of my pochapter 605, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	
Signature of Registered Agent Sean Honan, Assistant Secreta	ry
Division of Corporations, P.O. Box 63	

FILING FEE: \$25.00

INHS18 (12/13)