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S. WARREN 0CT 0 2 2017

COVER LETTER

	Registration Section Division of Corporations							
SUBJEC								
	Name of Limited Liability Company							
Dear Sir	or Madam:							
The enclo	osed Registered Agent/Registered Offic	e Change and fo	e(s) are submitted for filing.					
Please re	turn all correspondence concerning this	matter to the fol	llowing:					
Randal	H Simmons							
	Name of Person		•					
RHS L.	L.C. of Alabama							
	Firm/Company		•					
4 Porto	fino Dr Unit 1303							
	Address		•					
Pensac	ola Beach Fl 32561							
	City/State and Zip Code		•					
	ons92@yahoo.com							
E-n	nail address: (to be used for future annu	al report notifica	ition)					
For furth	er information concerning this matter, p	olease call:						
Randal	H Simmons	850	434-5986					
	Name of Person		Area Code & Daytime Telephone Number					
Registration SectionRegiDivision of CorporationsDiviClifton BuildingP.O.		ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314						
Enclosed is a check for the following amount:								
•	2 \$25 Filing Fee	Filing Fee & Certified Copy						

, "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

	me of the limited liability company:	/1 :		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6-28-17		1170000	
	Date of filing/registration in Florida	4.		Document number
(a)	Randal Colby Simmons			_
	Registered Agent and Registered Office shown on the records of	the Florida I	Dept. of Stat	e:
	4615 Ranchers Way	- <u>-</u>		_
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRESS)</u>		
	Milton, FI	32570		_
(b)	Randal H Simmons			17 SE
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addi	ress:	P 2
	4 Portofino Dr Unit 1303			FILED FILED FILED FILED FILED FILED FILED
	NEW Registered Office Address:			M 2: 14 F STATE FLORIDA
	Pensacola Beach FI	32561		A
e cha ent v is/w/	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the regist lability con of the limit	ered offic opany, it i ed liabili	e and the business office of the register is hereby confirmed that the change(s) ty company or as otherwise provided in
1/2		Rand	dal H Sir	mmons
Signa	fure of a member or authorized representative of a member			Printed or typed name of signee
ovisi e obl mere	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ignitions of my position as registered agent as provide ely reflect a change in the registered office address. It in writing of this change.	ree to act i e performa ed for in Ci hereby coi	n this cap nce of my hapter 60, ifirm that	pacity. I further agree to comply with the duties, and I am familiar with and access, F.S. Or, if this document is being file the limited liability company has been

Signature of Registered Agent