

→ 18506176383

(((H22000209868 3)))



H220002098683ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

2022 Ji.:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email .	Address:		
---------	----------	--	--

### LLC REGISTERED AGENT CHANGE RRH - FLORIDA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

JUN 16 2022

MISOLOMON

Electronic Filing Menu Corporate Filing Menu

Help

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

RRH - FLORIDA, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joshua Murphy
Name of Person
Registered Agent Solutions, Inc.
Firm/Company
Corporate Center One, 5301 Southwest Pkwy, Ste 400
Address
Austin, TX 78735
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

## Joshua Murphy

Name of Person

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:

□ \$25 Filing Fee

☐ \$55 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.

r ioi iaa		ODIDA I			
i. Na	me of the limited liability company: RRH - FL	ORIDA, L			
2. (a)	904 E BRAKER LANE	(h) 90	(b) 904 E BRAKER LANE		
2. (a) ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  AUSTIN, TX 78753	. ,	Mailing address	s of limited liability company:  **BE POST OFFICE BOX**)	
	6/6/2019	M1	900000590	5	
3.	Date of filing/registration in Florida	4.	Document r	ıumber	
5. (a)	<b>BLUMBERGEXCELSIOR CORPORATE S</b>	ERVICES, IN	IC.		
-, (-,	Registered Agent and Registered Office shown on the records of 155 OFFICE PLAZA DRIVE, 1ST FL Registered Office Address	OOR	of State:	2022	
		32301		NULL NEW YORK	
(b)	Registered Agent Solutions, Inc.  Enter name of NEW Registered Agent and/or NEW Register  155 Office Plaza Dr.	ed Office address:		19 19 19 19 19 19 19 19 19 19 19 19 19 1	
	NEW Registered Office Address: Suite A				
	Tallahassee	<sub>FL</sub> 32301	<u></u>		
the cha agent w was/wo	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the registered liability compai s of the limited l	office and the buny, it is hereby cortiability company (	siness office of the registered if irmed that the change(s)	
	lyde Rucker	Clyde F		CEO	
Signa	ture of a member or authorized representative of a member		,	ped name of signee	
provisi the obl to mere	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d in writing of this change.	te nertarmance	ormy aiaies ana .	i am iamiinar wan ana acceve	

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent