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(((H240000387663)))



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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : FILE RIGHT LLC Account Number : IZ0170000091 Phone : (718)878-5811 : (718)732-4580 Fax Number nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** 07 Email Address:_ 2

LLC REGISTERED AGENT CHANGE

RAPIDX MANAGEMENT LLC

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COVER LETTER H240000387663

TO: Registration Section Division of Corporations

SUBJECT: RAPIDX MANAGEMENT LLC

Name of Limited Liability Company

Dear Sir or Madain.

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

Please return all correspondence concerning this matter to the following:

Mark Fuchs

Name of Person

File Right RA Services, LLC

Firm/Company

1425 37th Street, Suite 201

Address

Brooklyn, NY 11218

City/State and Zip Code

agent@fileacorp.com

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

For further information concerning this matter, please call:

Sara Ringel	718 at (878-58l1)	
Name of Person		Area Code & Daytime Telephone Number	
<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		<u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Enclosed is a check for the following amount:

\$25 Filing Fee INH\$18 (2/14) S55 Filing Fee & Certified Copy

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\$TA	TEMENT OF CHANGE OF REGISTERED O LIMITED LIAB	FFICE OF	R REGISTERED AGE MPANY	INT OR BOTH H	
Pursi submi	ant to the provisions of sections 605.0114 or 605.011 is the following statement in order to change its registe	6, Florida St ered office or	atutes, the undersigned li registered agent, or both	mited liability comp 1, in the State of Flo	
1. N	ame of the limited liability company: <u>RAPIDX</u>	<u>M A N A G</u>	EMENT LLC		
2. (a)	1160 60TH STREET	(b)		<u> </u>	
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)				
	BROOKLYN, NY 11219		. <u></u>		
				w	
3.	12/13/2022		M22000018551		
	Date of filing/registration in Florida	4.	Document numb	er	
5. (a)	Business Filing Incorporated				
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dep	pt. of State;		
	1200 South Pine Island Rd, Plantation, FL 33326				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	~		
	- <u></u> ir				
	<u></u>			FILED 2024 JAN 31 PH	
				ے مرب ا	
(b)	File Right RA Services, LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addres			
	Each name of them seems the construction and of the construction		<u>-</u>		
	625 E Twiggs Street, Ste. 110			PH C	
	NEW Registered Office Address:			\sim	
	Tampa, FL 33602				
		- F AL C	ta of Florida, it is herebu	A 6	

change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a chapter in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

/s/ Mark Fuchs

Signature of Registered Agent

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

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TH FOR

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the the articles of organization or the operating agreement of the limited liability company. Mark Fuchs, Authorized Person /s/ Mark Fuchs Printed or typed name of signee Signature of a member or authorized representative of a member

Uar. 31. 2024 41:58AM - - SRES Fax