L04000023810

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| | | | | |
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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B. BOSTICK

APR 2 5 2011

EXAMINER

COVER LETTER

| TO: Registration Division of C | | | | | |
|--------------------------------|---|---|---|---------|-----|
| SUBJECT: | RCW | LLC | | | |
| | Name of Lim | ited Liability Company | | | |
| The enclosed Articles of | of Amendment and fee(s) are su | bmitted for filing. | | | |
| Please return all corres | pondence concerning this matte | r to the following: | | | |
| | Rich | ord Tacobacci Name of Person | | | |
| | | PCWLLC Firm/Company | | | |
| · | 1478 | JE 130th Street Address | | | |
| | North T | Tanu PL 33161 City/State and Zip Code | | | |
| | E-mail address: | to be used for future annual report notifica | ors.com | £ = | |
| For further information | concerning this matter, please | | WHV88 | APR 2 | T |
| Prchard | \acobacci of Person | at (305) 803-72 Area Code & Daytime | Felenhone Number | | |
| , (4.1.0 | o, . | / non code to buy mile | Felephone Number TOTA | MH 9: 1 | |
| Enclosed is a check for | the following amount: | | > | 7 | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy | atus & | ed) |

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

| - ROWLLC | · | |
|---|---|-----------------------------------|
| (<u>Name of the Limited Liability Compar</u> (A Florida Limited L | ny as it now appears on our records.) iability Company) | |
| The Articles of Organization for this Limited Liability Company | were filed on Hay 12, 2006 | and assigned |
| Florida document number <u>LD 4D00023810</u> . | · | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| RCW Interiors. | LLC | |
| The new name must be distinguishable and end with the words "Limit"L.L.C." | ted Liability Company," the designation " | LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | NA | - 51 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | | PR 22 MI 9 17 the name of the new |
| Name of New Registered Agent: New Registered Office Address: | N Enter Florida street ad | dress |
| | , Florida | Zip Code |
| | City | гір Соае |
| New Registered Agent's Signature, if changing Registered Agent: | | |

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> <u>Address</u> **Type of Action** ☐ Add Remove Remove Remove Remove $\prod Add$ Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Richard Jacobacci
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00



April 11, 2011

RICHARD IACOBACCI RCW LLC 1478 NE 130TH STREET NORTH MIAMI, FL 33161

SUBJECT: RCW, LLC

Ref. Number: L04000023810

We have received your document for RCW, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Letter Number: 611A00008671

Barbara Bostick Regulatory Specialist II

www.sunbiz.org