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T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

An of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Status Certificate of Status Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Search Fictitious Cowner Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Search UCC 11 Retrieval Walk In Walk In Will Pick Up Courier		·			
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COVER LETTER

TO:	Registration Se Division of Cor	ection rporutions		
SUBJ	rcyr.	& S Holdings, LLC		
	PROFILE PROFIL	Name of Lin	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		John C. Goede		
			Name of Person	
		Goede, Adamezyk, DeBoo	est & Cross, PLLC	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		6609 Willow Park Drive,	Second Floor	
			Address	· · · · · · · · · · · · · · · · · · ·
		Naples, FI 34109		
			City/State and Zip Code	
		sbedyan@gadelaw.com		
		E-mail address; (to be used for future annual report notifi	ication)
For fur	ther information e	oncerning this matter, please ea	off;	
John C	. Goede, Esq.		Name of Person Goede, Adamezyk, DeBoest & Cross, PLLC Firm/Company 6609 Willow Park Drive, Second Floor Address Naples, F1 34109 City/State and Zip Code bedyun@gadelaw.com E-mail address: (to be used for future annual report notification) erning this matter, please call: at () Area Code Daytone Telephone Number Illowing amount: 1 \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certi	
-	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
⊠ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	

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 Tollahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

· · · · · · · · · · · · · · · · · · ·			
(Same of the Limi	ted Liability Compa (A Florida Limited U	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited E Florida document number £13000171871	iability Company	were filed on December 12, 2013	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company;" the designation "LLC" or	
Enter new principal offices address, if appli-	cable:		18 S£(
(Principal office address MUST BE A STRE)			AREITA P
Enter new mailing address, if applicable:			TEGE PH C
(Mailing address MAY BE A POST OFFICE	<u> </u>		0.00 Jr. 50
B. If amending the registered agent and registered agent and/or the new registered of			nter the name of the new
Name of New Registered Agent:			
New Registered Office Address:	6609 Willow P	ark Drive, Second Floor	
the Articles of Organization for this Limited Is allorida document number L13000171871 This amendment is submitted to amend the follow. If amending name, enter the new name the new name must be distinguishable and contain the Enter new principal offices address, if application of the new mailing address MUST BE A STREE Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and egistered agent and egistered agent and/or the new registered agent.		Enter Florida street address	
	Naples	. Florid	la <u>34109</u>
		City	Ly Code

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	David Shweky	11-29 Clinton Avenue	
		D	O Add
		Brooklyn, NY 11205	■ Remove
			☐ Change
MGR	Nate Hyman	123 Shudy Lane Drive	
_		Lukewood, NJ 08701	
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Effective date, if other than the da	te of filing:		(optional)		
fan effective date is listed, the date must be Note: If the date inserted in this block	specific and cannot be p does not meet the an	nor to date of filing or mor	e than 90 days after filing t	Pursuant to 605	.0207 (3
document's effective date on the Depart	tment of State's reco	rds.	requirements, this date	with hot be tiste	co as co
ne record specifies a delayed ef The 90th day after the record	fective date, but is filed	not an effective tir	ne, at 12:01 a.m. i	on the earlie	er of:
	2/1				
December 14	7918				
Dated		 •			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00