

L14000004387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

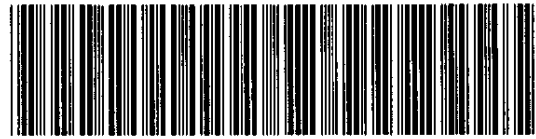
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700269837377

02/09/15--01015--004 **30.00

FILED
15 MAR 10 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 13 2015

T. HAMPTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RCG MANAGEMENT & INVESTMENT LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALBERTO LAVAYEN

Name of Person

Firm/Company

223 E. FLAGLER STREET SUITE# 504

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

manager@rpmngt.com

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

For further information concerning this matter, please call:

ALBERTO LAVAYEN

786 999-3165

Name of Person

at (_____) _____
Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$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 Status &
Certified Copy
(additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 16, 2015

ALBERTO LAVAYEN
223 E FLAGLER ST
504
MIAMI, FL 33131

SUBJECT: RCG MANAGEMENT & INVESTMENT LLC
Ref. Number: L14000004387

RECEIVED
15 MAR 10 AM 10:00
DIVISION OF CORPORATIONS
BUREAU OF CORPORATE
INFORMATION SERVICES

We have received your document for RCG MANAGEMENT & INVESTMENT LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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) 245-6051.

Tammy Hampton
Regulatory Specialist III

Letter Number: 415A00003226

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RCG MANAGEMENT & INVESTMENT LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/09/2014

Florida document number L14000004387

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RP MANAGEMENT & INVESTMENT LLC.

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

223 E. FLAGLER STREET SUITE# 504

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FLORIDA 33131

Enter new mailing address, if applicable:

223 E. FLAGLER STREET SUITE# 504

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FLORIDA 33131

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ALBERTO LAVAYEN

New Registered Office Address:

223 E. FLAGLER STREET SUITE# 504

Enter Florida street address

MIAMI

City

Florida 33131

Zip 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

FILED
15 MAR 10 11:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ALBERTO LAVAYEN	223 E. FLAGLER STREET SUITE# 504	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
AMBR	MARIA MIRANDA	223. E FLAGLER STREET SUITE# 504	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

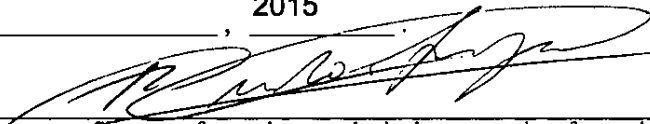
FILED
 MAR 10 11:14
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MARCH 2ND, 2015



Signature of a member or authorized representative of a member

ALBERTO LAVAYEN

Typed or printed name of signee

FILED
15 MAR 10 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA