## L18000209187

(Re	equestor's Name)	<del></del>
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
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2019 FEB 28 PM 3: 08
SECRETARY OF STATE

APPROVED AND FILED

15.00/19

## **COVER LETTER**

Div	ision of Cor	porations				
SUBJECT:	PEAK RDR	SOLUTIONS LLC				
SOBJECT.		Name of Lim	ited Liability Company			
The enclosed	I Anicles of .	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Andres Rosa				
			Name of Person		-	
		PEAK RDR SOLUTIONS	LLC			
			Firm/Company		-	
		6251 SW 42ND TERRAC	E		201 Se	
			Address		9 <b>FE</b>	2
		MIAMI, FL, 33155			8 2 8	FILE
		andres@rdrsolution.com	City/State and Zip Code		2019 FEB 28 PM 3: 08 SECRETARY OF STATE TALLANASSEEL FLORE	
Can Cambania			to be used for future annual report	notification)	<b>8</b>	
ror minner m	nomation co	oncerning this matter, please ca	ait:			
Andres Rosa			305 5429612 at ( )			
	Name of	Person		time Telephone Number	r	
Enclosed is a	check for th	e following amount:				
■ \$25,00 F	iling Fee	□ \$30,00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

MAILING ADDRESS:

TO:

Registration Section

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 TO ARTICLES OF ORGANIZATION OF

PEAK RDR SOLUTIONS LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record ability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Company Florida document number 1.18000209187	were filed on <u>08/31/2018</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi		
Enter new principal offices address, if applicable:	175 SW, 7TH STREET, Suite	1815, Mianii, P.E., 33130
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	office address on our record re:	APPROVED FILED FILED SECRETARIES SECRETARIAN SERVED FILED STATE STATE SECRETARIAN SERVED FILED F
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	722
	F	lorida
	City	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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Francisco Valdez	175 SW, 7FH STREET, Suite 1815 Miami, FL, 33130	<b>⊟</b> Add
	<del></del>		
			☐ Remove
			Change
		<u></u>	
			□ Remove
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			200 FEB Add APPROVED
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If an effect Note: If	te date, if other than the date of filing:  etive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day  f the date inserted in this block does not meet the applicable statutory filing requirement  it's effective date on the Department of State's records.	( <b>optional</b> ) ys after filing.) Pursuant to 605.0207 its, this date will not be listed as
he reco The 9	ord specifies a delayed effective date, but not an effective time, at 12 90th day after the record is filed.	2:01 a.m. on the earlier o
Dated _	February 26 . 2019	
	Signature of a member of authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00