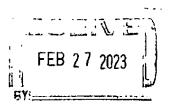
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(Requestor's Name)
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(Address)
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PICK-UP WAIT MAIL
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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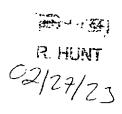
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations				
(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	RCRA Mai					
SUBJECT:	_	Name of Lin	nited Liability Company		2023 FEB 27 PH 12: 40	
The enclosed	LArticles of	Amendment and fee(s) are sub	amitted for tilino			
		ondence concerning this matter	_			
T tease return	an correspo	indence concerning this matter	to the following.			
		Reyneris O. Garcia				
		-	Name of Person			
		RCRA Management., Lim	nited Liability Company			
			Firm/Company		202	
		12834 SW 223rd Street			3	
		-	Address		827	
		Miami, FL 33170			P	
			City/State and Zip Code		:: -::	
		rcramanagment@gmail.cor			٠,0	
			to be used for future annual report in	otification)		
For further in	formation c	oncerning this matter, please c	all:			
Reyneris O.	Garcia		305 742-4575			
	Name o	f Person	at () Area Code Day(ime Telephone Number		
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling 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)		
Reg	ling Addrestistration S		<u>Street Address:</u> Registration S Division of C			
	. Box 632		The Centre of	•		

2415 N. Monroe Street, Suite 810

Tallahassee, F1, 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RCRA Management, Limited Liability Company (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 $\frac{03/09/2021}{1}$ ____ and assigned Florida document number $\frac{1.21000112503}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (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 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: New Registered Office Address: Enter Florida street address

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.

Cuv

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

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>	Name	Address	Type of Action
CEO	Reynoris O Garcio	12834 Sw 223rd Street	DAdd ·
		Miami, # (33170	£"Kemove
			Change
<u>MANDG</u> ER	Reyneris O. Gorcia	12834 SW 223rd Street	_ ⊠ Add
		Migmi, FC 33170	□Remove
			□Change
resident	Raquel Garcia	12834 SW 223 Street	□Add
		Miami, FC 33170	□Remove
			tachange
UA <u>UAGE</u> R	Raquel Garcia	12834 Sw 223 Street	⊠Add
		Miami, FC 33170	□Remove
			□Change
			οινίς Ιολίος 2028 FEB
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			_ □Add
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ctive date, if othe	er than the date o	of filing:	ot be prior to d	late of filing o	r more than 90	(optional) days after filing.) Pursuant to 60:
: If the date insert	ted in this block do	es not meet i	he applicable	e statutory fi	ling requirem	ents, this date	will not be list
iment's effective d	ate on the Departme	mi or state	s records.				
ord specifies a dela	ayed effective date.	but not an e	ffective time.	. at 12:01 a.r	n, on the earl:	ier of: (b) Th	e 90th day afte
filed.						•	·
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	<i></i>				 ,		
	Signato	He of a meme	er or authorize	ed representat	ive of a membe	er .	