

604000023810

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(Address)

(Address)

(City/State/Zip/Phone #)

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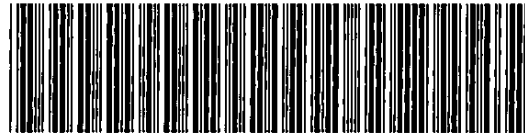
(Business Entity Name)

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604-23810
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RCW, 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:

Richard Iacobacci

(Name of Person)

RCW, LLC

(Firm/Company)

9520 HARDING, SUITE D

(Address)

SURFSIDE, FLORIDA 33154

(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD IACOBACCI

(Name of Person)

at (305) 803-7212

(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

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

RCW, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on October 12, 2004 and assigned document number L04000023810.

SECOND: This amendment is submitted to amend the following:

1. Please add the following person as a Manager/Member of the company:

Stephen Horn, 9520 Harding Ave., Suite D, Surfside, FL 33154

2. Please change the principal address, mailing address to the following:

9520 Harding Ave., Suite D, Surfside, FL 33154

3. Please change the address of Manager/Member Richard Iacobacci to the following:

9520 Harding Ave., Suite D, Surfside, FL 33154

4. Please change the address of the Registered Agent to the following:

9520 Harding Ave., Suite D, Surfside, FL 33154

Dated June 8, 2007

x 

Signature of a member or authorized representative of a member

RICHARD IACOBACCI

Typed or printed name of signee

Filing Fee: \$25.00

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