

L140000107058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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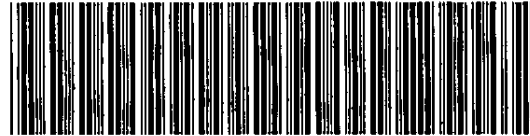
(Business Entity Name)

(Document Number)

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2016 MAY -3 A 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

MAY 04 2016
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RBI Alliance 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:

Leonardo Rostoker

Name of Person

RBI Alliance LLC

Firm/Company

1920 E Hallandale Beach Blvd St 703

Address

Hallandale Beach, FL 33009

City/State and Zip Code

leonardo@rbialliance.com

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

For further information concerning this matter, please call:

Leonardo Rostoker

754 2106312

at ()

Name of Person

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

FILED
2016 MAY - 3
TALLAHASSEE, FL
RECEIVED
DIVISION OF CORPORATIONS

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

RBI Alliance 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 07/07/2014 and assigned
Florida document number L14000107058.

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 "L.L.C."

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

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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>	<u>Type of Action</u>
MGR	Andres Saias	18911 Collins Ave. Sunny Isles	☒ Add
		FL, 33160	☐ Remove
			☐ Change
MGR	Alejandro Rostoker	19550 Ambassador CT	☒ Add
		North Miami Beach, FL 33179	☐ Remove
			☐ Change
MGR	Ernesto Rostoker	20000 E Country Club Dr. Apt 905	☒ Add
		Aventura, FL 33180	☐ Remove
			☐ Change
			☐ Add
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TALLAHASSEE, FLORIDA

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(optional)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 04/28/2016

Andre Rad

Signature of a member or authorized representative of a member

Andres Saias

Typed or printed name of signee

OPTIONAL) 21 MAY - 3 10:51
after filing pursuant to 6
this date will not be li
SECRETARY OF STATE
J. B. HASSELL
FLORIDA
01 a.m. on the ear