14000044015

(Re	equestor's Name)
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
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		f(I)
		6/10/21 Tm

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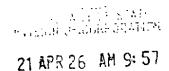
21 APR 26 AM 9: 57

COVER LETTER

TO: Registration S Division of Co			
CLATER THE CHES	By RR ELC		
SUBJECT:	Name of Lin	nited Liability Company	38 3 16
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Lorie Richardson		
		Name of Person	
	Services by RR LLC		
		Firm/Company	
	1092 Welch Hill Cir	•	
		Address	p Code annual report notification) 703-5277 Daytime Telephone Number ag Fee & S60.00 Filing Fee, Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Apopka FL 32712		
		City/State and Zip Code	·
	servicesbyrr@gmail.com		
For further information of	E-mail address: (concerning this matter, please c		outication)
Lorie Richardson		407 703-5277	
Name (of Person		me Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
<u>Mailing Addre</u> Registration		Street Address:	ection
Division of C		_	
P.O. Box 632 Tallahassee,			
rananassee,	гь 34314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Services By RR LLC			
(Name of the Limit	ed Liability Company as it now app (A Florida Limited Liability Company	ears on our records.) /)	
The Articles of Organization for this Limited Li Florida document number <u>L14000044015</u>	ability Company were filed on	March 17, 2014	_ and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," th	e designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u> BOX)		
B. If amending the registered agent and/or r agent and/or the new registered office addres		r records, <u>enter the name (</u>	of the new registered
Name of New Registered Agent:	Lorie Richardson		·
New Registered Office Address:			
-	Enter F	lorida street address	
		, Florida	
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

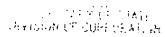
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided 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 21 APR 26 AH 9: 57

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Lorie Richardson	1092 Welch Hill Cir Apopka, FL 32712	≅Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□ Add
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Effective date,	, if other th	nan the dat	e of filing: _	9 April 2021			(optio	nal)	
f an effective date Note: If the date document's effe	le inserted ii	n this block o	does not meet	the applicat	ole statutory f	or more than 96 filing require	days after for days a	ling.) Pursuant late will not b	to 605.0207 be listed as t
record specifie d is filed.	s a delayed	effective dat	e, but not an e	effective tim	e, at 12:01 a.	m. on the ear	lier of: (b)	The 90th day	y after the
Dated			·, -	1).		\bigcap			
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		Sign	ature of a mem	ber or authori	zed representa	tive of a mem	жг		