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A. BUTLER SEP 1 4 2022

COVER LETTER

TO: Registration Section

Division of Cor	porations		
	TMENTS, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Picase return all correspo	ondence concerning this matter	to the following:	
	NANDKISHORE RANAE	DIVE	
		Name of Person	
		Firm/Company	
	9213 BENTLEY PARK C	IRCLE	
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	KISHORERANADIVE@G	MAIL.COM to be used for future annual report notific	ration)
For further information c	oncerning this matter, please of		(anon)
NANDKISHORE RANZ		321 946-0140	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	ne 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 9 Division of C P.O. Box 632 Tallahassee,	Section forporations 7	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations Illahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

RF INVESTMENTS, LLC

2022 JUH 23 PM 6: 33

Name of the Limited Liability Company as it now appears on our records. GESTI IN STATE TALLARY SEET IN STATE TA	(Name of the Lim	ited Liability Com	pany as it now appears o	on our records.)
The Articles of Organization for this Limited Liability Company were filed on		(A Florida Limite	a Liability Company)	TALL ALL OF STATE
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A 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 MUST BE A STREET ADDRESS) Enter new 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: N/A New Registered Office Address: Enter Florida street address Enter Florida street address Florida Zip Code New Registered Agent's Signature, if changing Registered Agent:	The Articles of Organization for this Limited I	.iability Compar	ny were filed on 03/11	/2002 and assigned
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N/A 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 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 Enter Florida street address City Zip Code New Registered Agent's Signature, if changing Registered Agent:	This amendment is submitted to amend the fol	lowing:		
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Name of New Registered Agent: New Registered Office Address: Enter Florida street address	(Mailing address MAY BE A POST OFFICE	(BOX)		
Name of New Registered Agent: New Registered Office Address: Enter Florida street address				
Name of New Registered Agent: New Registered Office Address: New Registered Office Address				
Name of New Registered Agent: New Registered Office Address: Enter Florida street address	B. If amending the registered agent and/or	registered offic	e address on our reco	ords, enter the name of the new reg
New Registered Office Address: Enter Florida street address				-
New Registered Office Address: Enter Florida street address				
New Registered Office Address: Enter Florida street address	Name of New Registered Agent:	N/A		
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. Florida City Zip Code New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:		Entra El mide	a stand while see
New Registered Agent's Signature, if changing Registered Agent:				
New Registered Agent's Signature, if changing Registered Agent:			··· <u>-</u>	Florida
			City	Zip Code
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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>	Address	Type of Action
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			Remove
			Change
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ISHA RANADIVE -MEMB	ER: 9213 BENTLEY PARK CI	RCLE, ORLANDO, FL	. 32819	
DHRUV RANADIVE-MEN	IBER, 9213 BENTLEY PARK	CIRCLE, ORLANDO,	FL 32819	_
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cord specifies a delayed effective filed.	e date, but not an effective time	e, at 12:01 a.m. on the e	arlier of: (b) The 90th day aft	ter ti
JUNE 10	Signature of a member or authorize	Ω .		
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Typed or printed name of signee