

105000060585

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

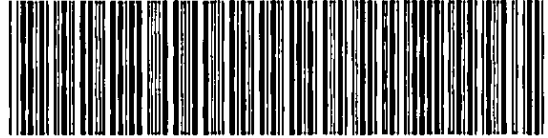
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

J.C.
07/13/21



100366440511

06/10/21--01012--024 **60.00

2021 JUN 10 A 11:24

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: R S ENTERPRISES 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:

ROBERT SOLIS

Name of Person

Firm/Company

17535 SW 13TH ST

Address

PEMBROKE PINES, FL 33029

City/State and Zip Code

RICO@RICOSPRO.COM

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

For further information concerning this matter, please call:

AILEEN D SOLIS

786
at ()

768-9433

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

7071 JUN 10 AM 11:20

FILED

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

R S ENTERPRISES 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 06/17/2005 and assigned
Florida document number L05000060585.

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

17535 SW 13TH ST.

(Principal office address MUST BE A STREET ADDRESS)

PEMBROKE PINES, FL. 33029

Enter new mailing address, if applicable:

17535 SW 13TH ST.

(Mailing address MAY BE A POST OFFICE BOX)

PEMBROKE PINES, FL. 33029

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

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

[illegible]

2021 JUN 10 A 11:24

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 06/07/2021

07/2021
Robert Solis
Signature of a member

Signature of a member or authorized representative of a member

ROBERT SOLIS

Typed or printed name of signee

Filing Fee: \$25.00