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EXAMINER

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COVER LETTER

Division of Cor	porations		
SUBJECT: RDP R	etail. LLC		0
·	(Name of Limited	d Liability Company)	
The enclosed Articles of	Amendment and fee(s) are submi	tted for filing.	
Please return all correspo	ondence concerning this matter to	the following:	
Y	Stanley A. Tarkow		
		(Name of Person)	
	RDP Retail, LLC		
		(Firm/Company)	
	6812 S. Faul St.		
		(Address)	
	Tampa, FL 33616		
		City/State and Zip Code)	
For further information of	concerning this matter, please call	:	
Stanley A. Tarkow		at (<u>813</u>) 832 6326 (Area Code & Daytime T	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he following amount:		
2 \$25.00 Filing Fee	S30.00 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:

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RDP Retail, LLC	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.)
(/ F Kinda Shimes Sake	
The Articles of Organization for this Limited Liability Company we	ere filed on May 5, 2006 and assigned
Florida document number L06000046975	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	y company here:
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company, the designation "LLC" or the aboreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Trincipal office dames, west in the tribute of the	
-	
Paten and aniling address if applicables	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	,
-	
B. If amending the registered agent and/or registered offic	e 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:	As o
	(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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

NiOK – Manager · MGRM = Managing Member **Title** <u>Name</u> Address **Type of Action MGRM** Bradley W. Campbell 21117 N. 74th place Scottsdale AZ 85255 **₽** Remove Add [Remove Add Remove □ Add Remove ☐ Add ☐ Remove 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) member or authorized representa-Stanley A. Tarkow

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00