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COVER LETTER

Division of Co		
Rigaud Ma	anagement, LLC	
SUBJECT:	Name of Lin	mited Liability Company bmitted for filing. r to the following:
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.
Please return all correspo	ondence concerning this matter	to the following:
	Ronald Rigaud	
		Name of Person
	C/O Law Offices of Larry	A. Harshman, P.A.
		Firm/Company
	12360 SE 132 Court, Suite	e 114
		Address
		City/State and Zip Code
	Miami, FL 33186	
	E-mail address: ((to be used for future annual report notification)
For further information of	concerning this matter, please c	eall:
Lynda Beruman		305 279-9848
Name o	of Person	at (
Enclosed is a check for t	he following amount:	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:
Registration : Division of C		Registration Section
P.O. Box 632		Division of Corporations The Centre of Tallahassee
Tallahassee		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

ARTICLES OF A	AMENDMENT		
To	C		
ARTICLES OF O	RGANIZATIO	N	19 38 M
0	F		See again.
			٠ <u>٠</u>
Rigaud Management, LLC			10 AC 23 MA 92 PM
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on	our records.)	- (g. (설)
(A Florida Limited L	iability Company)		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
The Articles of Organization for this Limited Liability Company	were filed on 11/07/2	006 and	d assigned
		and	1 doorgreed
Florida document number L06000107991			
This amendment is submitted to amend the following:			
Ţ			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designate	ation "LLC" or the abbreviatio	n "L.L.C."
Fatanasa and all all all all all all all all all al			
Enter new principal offices address, if applicable:		<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)			
		<u></u>	
Enter new mailing address, if applicable:			
• • • • • • • • • • • • • • • • • • • •			
(Mailing address MAY BE A POST OFFICE BOX)		 	
	·-		_
B. If amending the registered agent and/or registered office a	ddress on our record	ls, <u>enter the name of the</u>	new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida sti	reet address	
	Circ	, Florida	
	City	Zip Co)de
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>	Type of Action
MGR	GILBERT RIGAUD	1541 Brickell Avenue	□Add
		Suite 1602	■Remove
		Miami, FL 33129	_
MGR	RONALD GERARD RIGAUD	1541 Brickell Avenue	8.4
		Suite 1602	
		Miami, FL 33129	
			□Add
			🗀 Remove
			Change
			Remove
			□Add
		-	Remove
			□Change
			□Add
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			□Change

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ree ·	ive date, if other than the date of filing: 12/20/2019 (optional)
f an eff <u>Note:</u>	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
f an eff Note: docum e recor	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records. d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
If an eff Note: docum e recor rd is fil	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records. d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
If an eff Note: docum e recor rd is fil	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records. d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
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Filing Fee: \$25.00