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2009 JUN 18 PM 3: 45
SECRETARY OF STATE
TALL AHASSEF, FLORIDA

FILED

COVER LETTER

TO: Regisfration Section Division of Corporations	
SUBJECT: RFB AKB 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:	
RONALD F. BENJAMIN Name of Person	2009 JUN 18 SECRETAR
Firm/Company 314 BUTTONWOOD LANE Address	N 18 PH 3: 45
City/State and Zip Code RONBENIAMIN OS ENBAGMAIL. COM E-mail address: (to be used for future annual report potification)	Sin 5
For further information concerning this matter, please call:	
RONNIA BRUJAMIN at (727) 742-6670 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 Certified Copy (additional copy is enclosed) \$60.00 Filing Fee \$Certified Copy (additional copy is enclosed)	Status &
MAILING ADDRESS: 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

REBAKBLIC	
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)
	ompany were filed onMArch 26, 08 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ROOM LLC
The new name must be distinguishable and end with the word "L.L.C."	Is "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	JUN 18 PH 3: 46 AHASSEE, FLORIDA
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address on our records, <u>enter the name of the new</u> ess here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
Now Projectored Agent's Cignotium if shanging Projectored	·

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 Changing Registered Agent, Signature of New Registered Agent

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:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> <u>Name</u> **Address** . ☐ Add Remove Remove Remove ∐Add Remove ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member F. BENJAMIN
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00