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T. CLINE
MAY - 6 2008
EXAMINER

COVER LETTER

TO: Registration S Division of Co		•			
SUBJECT:		QUITIES L	<u>-LC</u>		
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
	_	(Name of Person)			
	NIVIR	(Firm/Company)			
	605 Charl	(Address)			
	Tarpon S	Prings, FL 3466 (City/State and Zip Code)	<u> 89</u>	2008 MAY SECRETALLAHA	#*(**)
For further information	concerning this matter, please of	call:		AHAS AHAS	Augus manan
Richard	Renedo of Person)	at (813) 263~25 (Area Code & Daytime To	5 3 elephone Number)	MAY -5 PM 2: 00 RETARY OF STATE AHASSEE FLORIDA	i O
Enclosed is a check for	the following amount:			OA O	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Co	f Status &	
MAII	INC ADDRESS:	STDEET/COUDIED	A DDDFCC.		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

RMREG	quities LLC	·	
(<u>Name of the Limited Liabi</u> (A Florid	ifity Company as it now appears on da Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability	y Company were filed on	19 2007 a	nd assigned
Florida document number L070001065	522	•	
This amendment is submitted to amend the following	ţ;		
A. If amending name, enter the new name of the l	limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	the designation "Deor	or the abbreviation
B. If amending the registered agent and/or reqressioner registered agent and/or the new registered office a		records, enter the in	mecof the new
Name of New Registered Agent:		jo j	
New Registered Office Address:	(Enter	Florida street address)	
	·		
	(City)	, Florida(Zi	ip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:		
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chang	r and complete performance of m d agent as provided for in Chapte tered office address, I hereby con	ly duties, and I am fai er 608, F.S. Or, if thi	miliar with and s document is
	(If Changing Registered Agent, S	ignature of New Register	red Agent)

Page 1 of 2

* See Next Page

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Rinio-Irene J. Renedo	LOS Charlotte Ave. Tarpon springs, FL 34689	Add Remove
			Add Remove
			Add Remove
			Add Remove
		A	A COLOR
			RY S
D. If amend	ling any other information, enter change(s)	here: (Attach additional sheets, if necessary.)	FORIDA -
			_
		,	-
Dated	Jacobse Jacobse	. La	
	Richard M.	Renedo	

Page 2 of 2

Filing Fee: \$25.00