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HALL COUNTY OF FLORIDA  
TALLAHASSEE, FLORIDA

D. BRUCE

APR 9 2010

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RPG Sales & Marketing, 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:

James Purdy  
Name of Person

RPG Sales & Marketing LLC  
Firm/Company

430 W. New England Ave Apt. 16  
Address

Winter Park, FL 32789  
City/State and Zip Code

jt.purdy@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Purdy  
Name of Person

at (321) 946-0924  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
10 APR -8 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

RP6 Sales & Marketing, 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 6/19/08 and assigned Florida document number LO8000010268.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

430 W. New England Ave. Apt 16  
Winter Park, FL 32789

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

same as above

**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:

James Timothy Ruddy

New Registered Office Address:

430 W. New England Ave. Apt 16

Enter Florida street address

Winter Park

City

, Florida

32789

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.*

James T. Ruddy  
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Amy E. Ridge	18911 Collins Ave #604 Sunny Isles Beach FL 33160	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	JAMES T. Purdy	430 W. New England Ave Apt 116 Winter Park, FL 32789	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Dated 3/9/10, \_\_\_\_\_.

\_\_\_\_\_  
 Signature of a member or authorized representative of a member  
 Amy Ridge  
 Typed or printed name of signee