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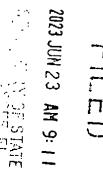
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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Consideration to Filips Officer
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6/26/23 VIN



COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Ro	SAMAR IN	IVESTMENTS ited Liability Company	LLC
		Name of Limi	ited Liability Company	
The enclosed Arti	icles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all c	orrespon	dence concerning this matter	to the following:	
		MARIA	F. MALOSE Name of Person	TTI
		ROSAM	AR INVESTME	NTS LLC
		2278 E	Eaple Run a	RCIE_
		WESTON Fmalo E-mail address: (FL, 33327 City/State and Zip Code Setties Sma to be used for future annual report not	il. com
For further inforr	nation co	ncerning this matter, please ca	all:	
Mario	R F Name of	Malosethi Person	at (954) 709 Area Code Daytir	1569 ne Telephone Number
Enclosed is a che	ck for the	following amount:		
□ \$25.00 Filing	g 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)
Regist Divisio P.O. B	ox 6327	ection orporations	Street Address: Registration So Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROSAMAR	IN VEST	MENTS	LLC	JN 23	
(Name of the Limited Lii (A Flo	orida Limited Liab	lity Company)	nar (ecorus.)	1377 A	D
(Name of the Limited Lie (A Florida document number	ty Company we	re filed on <u>OC</u>	ober 13,20	0097 and amig	ned
This amendment is submitted to amend the following					
A. If amending name, enter the new name of the	limited liability	company here:			
The new name must be distinguishable and contain the words	Limited Liability	Company," the design	nation "LLC" or the c	ibbreviation "L.L.	C."
Enter new principal offices address, if applicables	: _a DDRESS) _	2528 WES70	EAGLE R N , FL ,	33327	CLE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOS	₹ -	2528 WESTO	EAGLE I	RUN (1 33327	.RCLE
B. If amending the registered agent and/or regist agent and/or the new registered office address he		ress on our reco	rds, <u>enter the na</u>	me of the new	registered
Name of New Registered Agent:	MARI	A F_	MALOSETT RUN (<u>`</u>	
New Registered Office Address:	2528	EAGLE Enter Florida	RUN C	irclE	
_	WE		, Florida _	3332 Zip Code	.7_

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>	Address	Type of Action
		<u></u>	□Add
			□Remove
			□Add
			□Remove
			□Change
·-			□ Add
			□Remove
			Change
			□Add
			Remove
			Change
			🗀 Add
			□Remove
			Change
			□Add
			Remove
			□Change

Note	tive date, if other than the date of filing:
ne reco	ord 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 filed.
Date	Markallo_
	Signature of a member or authorized representative of a member

• • •

Filing Fee: \$25.00