

L09000/15554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

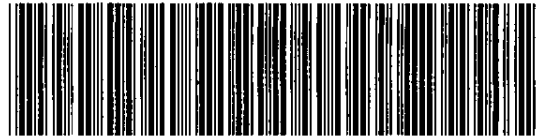
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800167253528

02/24/10--01012--007 \*\*25.00

FILED  
10 FEB 24 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

FEB 25 2009

EXAMINER

## COVER LETTER

TO: ~ Registration Section  
Division of Corporations

SUBJECT: RN Legal 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:

Deborah Malanick  
Name of Person  
RN Legal, LLC  
Firm/Company  
7616 FAIRFAX DR.  
Address  
TAMARAC, FL 33321  
City/State and Zip Code  
Dm20RNO@yahoo.com  
E-mail address: (to be used for future annual report notification)

FILED  
10 FEB 24 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DEBBIE MALANICK at 954-612-5463  
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  
☐ \$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

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

RIN Legal, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
10 FEB 24 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on DECEMBER 01, 2017 and assigned  
Florida document number L09000115554

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 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)

7616 FAIRFAX DR  
TAMARAC, FL. 33321

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

DEBORAH MALANICK  
7616 FAIRFAX DR.  
TAMARAC, FL. 33321

**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:

MILTON MALANICK

New Registered Office Address:

Enter Florida street address

\_\_\_\_\_, Florida

City

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.

Milton Malanick  
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	John W. Hussey	20 FAIRWAY RIDGE LAKE WYLLIE, S.C. 29710	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Deborah Malanick	7616 FAIRFAX DR. TAMARAC, FL. 33321	<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)

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

FILED  
10 FEB 24 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated

02/18/10

*Deborah Malanick*

Signature of a member or authorized representative of a member

DEBORAH MALANICK

Typed or printed name of signer