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B. BOSTICK
DEC 1 4 2012
EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

RC Enterprises & Sales, 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:

Rahel Csuka-Walker

Name of Person

RC Enterprises & Sales, LLC

Firm/Company

4001 Santa Barbara Blvd. #386

Address

Naples, FL 34104

City/State and Zip Code

rcgifts@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rahel Csuka-Walker

Name of Person

_*,*239*,*248-5976

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 1 22 2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RC Enterprises & Sales, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Compan	y were filed on 01/25/2010	and assigned
Florida document number <u>L1000009268</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and end with the words "Lin" "L.L.C."	nited Liability Company," the design	ation "LLC" or the abbreviation
L.L.C.		An L
Enter new principal offices address, if applicable:		ALE IZ
(Principal office address MUST BE A STREET ADDRESS)		E T
		SS S
Enter new mailing address, if applicable:		- CS4
(Mailing address MAY BE A POST OFFICE BOX)		
•		
B. If amending the registered agent and/or registered o	office address on our records	onter the name of the na
registered agent and/or the new registered office address he		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
	, Flor	ida
	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.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ronald Caballero	5470 25th PL SW	Add
		Naples, FL 34116	Remove
MGRM	Rahel Csuka-Walker	5470 25th PL SW	Add
		Naples, FL 34116	Remove
MGRM	Jason Walker	5470 25th PL SW	
		Naples, FL 34116	Remove
————————————————————————————————————			Add
			Remove
			TO AM
		A C	Remove
			Add
			Remove

D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
-	
Dated De	ecember 11 2012 .
	Patrel Cruby-Walker
	Signature of a member or authorized representative of a member
	Rahel Csuka-Walker
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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