# L100000075646

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## **COVER LETTER**

TO: Registration Section Division of Corpo		· ·	•			
SUBJECT:	RTE I	nvestments, LLC				
		imited Liability Company				
The enclosed Articles of An	nendment and fee(s) are	submitted for filing.				
Please return all correspond	ence concerning this mat	tter to the following:				
		Timothy Snodgrass				
		Name of Person				
		Firm/Company	· · · · · · · · · · · · · · · · · · ·			
	5	6373 Ehrlich Rd #203-2	09			
		Address				
		Tampa, FL 33625				
		City/State and Zip Code		AE SE	궁	
	tir	m.snodgrass@gmail.co	om	SA A	10 NOV 22	water
	E-mail address	s: (to be used for future annual re	port notification)	ASS.	~ : 	named Transfer
For further information con-	cerning this matter, pleas	se call:		Maria Maria		
Timoth	y Snodgrass	at (_813_)_	508-7355	FL S	: :	W
Name of Po		Area Code &	Daytime Telephone Number	STATE FLORIDA	Ail 8: 23	
Enclosed is a check for the t	following amount:					
<u></u>	<b>√</b> ]\$30.00 Filing Fee &	\$55.00 Filing Fee &	<b>\$60.00</b> Filin	g Fee,		

Certified Copy

(additional copy is enclosed)

**MAILING ADDRESS:** 

Certificate of Status

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

### STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

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



# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RTE Inve	estments, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appea ted Liability Company)	rs on our record	<u>s.</u> )
The Articles of Organization for this Limited Liability Comp	pany were filed on	July 19, 20	10 and assigned
Florida document numberL10000075646			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :	
	estments, LLC		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Comp	any," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	<del> </del>	10 NO
			22 22 485
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			$\Xi_{io}$
	-		8: 23 TATE ORID
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>en</u>	A
Name of New Registered Agent:	<del> </del>		
New Registered Office Address:			
	Er	iter Florida stree	t address
		, Florid	
	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 angending 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				
	<u> </u>		Add Remove				
			Add Remove				
			Add Remove				
	<del>-</del> · · · · · · · · · · · · · · · · · · ·		Add Remove				
			Add Remove				
	<del></del>		AddRemove				
D. If amer	nding any other information,	enter change(s) here: (Attach additional sheets, if necessa	ry.)				
_ _							
 Dated	November 18		10 SEI				
	Signature	e of a member or authorized representative of a member	T & T				
		Timothy Snodgrass	22 ARY SSE				
		Typed or printed name of signee  Page 2 of 2	AH 8: 2				
		Filing Fee: \$25.00	23 RIE				