~ L10000129658

(Re	equestor's Name)	
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SEURE TARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Division of C	Section Corporations				
SUBJECT:	SUBJECT: RNR MANAGEMENT, LLC				
30 0 00001.		ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corres	spondence concerning this matter	r to the following:			
		Name of Person		· - 2	
	RN	RNR STRATEGIES, LLC		2011 JAN 28 SECRETAR TALLAHASS	
		Firm/Company	W 28 PH		
	95 E. Mitch	5 E. Mitchell Hammock Road, Suite 201B Address			
		Oviedo, Florida 32765 City/State and Zip Code			
	E-mail address: (amiholic@gmail.com to be used for future annual repor	t notification)		
For further information	n concerning this matter, please c	ali:			
	NR Strategies, LLC at (407) 956-3449 Area Code & Daytime Telephone Number		r		
	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	closed) Certified	ite of Status &	ed)
Regis	LING ADDRESS: stration Section sion of Corporations	Registration :			
P.O.	Box 6327 hassee, FL 32314	Division of Corporations Clifton Building 2661 Executive Center Circle			

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RNR M	IANAGEMEN I, LLC	<u> </u>			
(Name of the Limited Liabli (A Florid	ity Company as it now appears a Limited Liability Company)	on our records.)			
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	12/20/2010	and a	ssigned	
This amendment is submitted to amend the following:			20 TAS		
A. If amending name, enter the new name of the lin			ECKET LLAHA NAC II	T	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company	y," the designation	- P	e abbreviatio	
Enter new principal offices address, if applicable:			<u> </u>		
(Principal office address MUST BE A STREET ADD	DRESS)		공주 교육 교육		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or regiregistered agent and/or the new registered office ad	stered office address on ou dress here:	r records, <u>enter</u>	the name	of the nev	
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
		, Florida _			
	City		Zip Co	de	

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 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 Type of Action **Title** <u>Name</u> <u>Address</u> MGR RNR HOLDINGS, LLC 95 E. MITCHELL HAMMOCK ☐ Add Remove SUITE 201B **OVIEDO, FLORIDA 32765** RNR STRATEGIES, LLC MGR 95 E. MITHCELL HAMMOCK ✓ Add Remove SUITE 201B **OVIEDO, FLORIDA 32765** Add r i ⊓ Remove Remove <u>ي</u> ∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JANUARY 27** Dated Signature of a member of authorized representative of a member RNR STRATEGIES, LLC Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00