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(Re	questor's Name)
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	ime)
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	NELSON TARACIDO		
		Name of Person	 :
	NELSON TARACIDO, PA	\	
		Firm/Company	
	8400 NW 33rd St, Suite 10)4	
		Address	
	Doral, FL 33122		
	_	City/State and Zip Code	
	nelson@ntpalaw.com		
	E-mail address: (to be used for future annual report notificati	ion)
For further information c	oncerning this matter, please c	all:	
Jaclyn Rosell		786 888-1599 Ext. 10	982
Name o	f Person	at () Area Code Daytime Tel	lephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S		Registration Section	
Division of C P.O. Box 632	-	Division of Corpor The Centre of Talk	
Tallahassee. I		2415 N. Monroe St	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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RDM REAL ESTATE 1, LLC

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

The Articles of Organization for this Limited Liability Comp	any were filed on 01/11/2011	and assigned
Florida document number <u>L11000004049</u>		
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 I	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		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here: Name of New Registered Agent:	ice address on our records,	
New Registered Office Address:	Enter Florida street	and Improve
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duti as provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
Īſ	Changing Registered Agent, Sign	ature 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

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DE MIZRAHI, ROBERTO	382 NE 191 St	□ Add
		#46180	□Remove
		MIAMI, FL 33179-3899	
			□Add
			□Remove
			Change
			□ Add
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			□Remove
			□Change

	
<u>, </u>	
ffective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date coording. If the date inserted in this block does not meet the applicable sta	of filing or more than 90 days after filing.) Pursuant to 605.03 itutory filing requirements, this date will not be listed
ocument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 1	12:01 a.m. on the earlier of: (b) The 90th day after the
l is filed.	
July 23 2021	
Dated July 23 2021	
Signature of a member or authorized re	anna antotiva of a manhar

Filing Fee: \$25.00