# 1200049501

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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Rach Partners, LLC	<del></del>		
			<del></del>
		<del></del>	
			Art of Inc. File
······································	···	-	LTD Purtnership File
			Foreign Corp. File
			L.C. File
			L.C. File Fictitious Name File Figure 12.
			Trade/Service Mark 5
			Art. of Amend. File & & & & & & & & & & & & & & & &
			Dissolution / Withdrawat
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
J.g.imta. c			Vehicle Search
		· <del></del> -	Driving Record
Requested by: SETH			UCC 1 or 3 File
<del></del>	Data	Time	UCC 11 Search
Name	Date	Time	UCC 11 Retrieval

47.66

### **COVER LETTER**

	gistration Sec vision of Corp					
SUBJECT:	Rach Partner	rs, LLC				
SUBJECT:		Name of Lin	nted Liability Company	·		
The enclose	d Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please return	n all correspon	idence concerning this matter	to the following:			
		John C. Goede, Esq.				
		<del> </del>	Name of Person	<del></del>		
		Goede, Adamczyk, DeBoo	est, & Cross, PLLC			
			Firm/Company			
6609 Willow Park Drive, Second Floor						
			Address	· <del></del>	201 Si	
		Naples, Fl 34109			2019 HAY	Ä
		sbedyan@gadclaw.com	City/State and Zip Code		715	
		E-mail address:(	to be used for future annual report noti	fication)		E C
For further is	nformation co	ncerning this matter, please c	alt:			C
Susan L. Be	dyan		239 331-5100 at ()		3	
	Name of	Person		e Telephone Number		
Enclosed is a	a check for the	following amount:				
□ \$25.00 F	iling Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing  Certificate (  Certified Co  (additional cop	of Status &	

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

Rach Partners, LLC			•	
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)			
The Articles of Organization for this Limited Liability Cor Florida document number <u>L12000049501</u>	mpany were filed on April 11, 2012	and as	ssigned	
This amendment is submitted to amend the following:	•			
A. If amending name, enter the new name of the limite	ed liability company here:			
The new name must be distinguishable and contain the words "Limited	d Liability Company:" the designation "LLC" or the	abbreviation "E	L.C."	_
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	(SS)			
Enter new mailing address, if applicable:		<u></u>	20	<del>_</del>
(Mailing address MAY BE A POST OFFICE BOX)		====	<u> </u>	_
			===	- <u>}</u>
			<u></u>	
B. If amending the registered agent and/or register	red office address on our records, ente	r the name		new
registered agent and/or the new registered office addres	ss here:	17.	<b>=</b>	7
		: 71	œ.	
Name of New Registered Agent:			ဒ္	_
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 605, 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

APPROYEU

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 AMBR = Authorized Member

<u>Title</u> <u>Name</u>		Address	Type of Action		
MGR	Soleiman Rabanipour	11-29 Clinton Avenue			
		Brooklyn, NY 11205	■ Remove		
			□ Change		
MGR	Nathan Matut	1392 Ocean Parkway	■ Add		
		Brooklyn, NY 11230			
			Change		
			□ Remove		
			Change		
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(If an ei <u>Note:</u>	tive date, if other than the date of filing:	5.0207 ( ed as 1	(3)(b) he
If the re (b) The	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlies 90th day after the record is filed.	er of:	
Dated	May 15 2019		
	Signature of a member or authorized representative of a member		