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(Re	equestor's Name)	
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J. SAULSBERRY EXAMINER

MAY 7 2013

COVER LETTER

Division of Co					
SUBJECT:		L CONSULTIN ted Liability Company	G, PL.L.C.		
	Amendment and fee(s) are sub	-			
· · · · · · · · · · · · · · · · · · ·	TANIYA	LALL JIMENE Name of Person	7.		
	RIGHTEC		P.L.L.C.		
	P.O. Box	Address		2013 MAY	ï
	OCOEE.	FL 34761 City/State and Zip Code		-3 AM	
For further information of	E-mail address: (to concerning this matter, please c	Jimenez e gm o be used for future annual report not all:	ail. com	8: 15	€aj
Taniya Lo	Jimene	at (407) 493 - Area Code & Daytin	ro397 me Telephone Number		
Enclosed is a check for t	he following amount:		,		
□ \$25.00 Filing Fee	☐\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Stat	tus &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp	pany as it now appears on ou Liability Company)	r records.		-
The Articles of Organization for this Limited Liability Compar	ny were filed on 4-17.	2012	and	assigned
Florida document number <u>L12 000051774</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	ability company here:			
RIGHTEOUS JUSTI				
The new name must be distinguishable and end with the words "Lin"L.L.C."	mited Liability Company," the	designation		the abbreviation
Enter new principal offices address, if applicable:			h> (\$	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			1 m	
			77 - 4. 77 - 4.	ω) <u></u>
Enter new mailing address, if applicable:	P.O. Box	1147		œ <u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	ococe, FL	347	6	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he Name of New Registered Agent:	office address on our rec ere:	ords, <u>ente</u>	r the nam	e of the new
New Registered Office Address:				
324	Enter Flor	ida street o	address	 -
		_, Florida		
	City		Zip C	'ode

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mana MGRM = Mai	ger naging Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
		A CARAGON CO.	
			Remove
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, j	anding any other information autor change(s) have (Attach additional change if unaccessory)		
ı amı	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
-			
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-			
- !	April 30 , 2013 .		
	April 30, 2013.		
	Signature of a member or authorized representative of a member		
	Taniya Lall limenez Typed or printed name of signee		
	Page 3 of 3	20	
	Filing Fee: \$25.00	2013 HAY -	
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