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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: RG M	IETRO LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Alexander G	Samarnik	
		Name of Person	
	RG METRO		
		Firm/Company	
	1900 Sunse	t Harbour Dr #160)7
	-	Address	
	Miami Beacl	h, FL 33139	
		City/State and Zip Code	201 731 731
	algamarnik@yah	OO.COM to be used for future annual report-notifical	tion)
For further information co	oncerning this matter, please co	-	2014 JAN 24
	-		
Alexander (at (786) 486-005 Area Code Daytime Te	33 Elephone Number
rame of	reison	Alea Code Daytille Te	Stephione Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

RG METRO LLC		
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company were filed on 0. Florida document number L12000091479	7-16-2012 and assigne	d
This amendment is submitted to amend the following:	. *.*	
A. If amending name, enter the new name of the limited liability company h	<u>ere</u> :	
The new name must be distinguishable and end with the words "Limited 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)	30 2	
	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
B. If amending the registered agent and/or registered office address or	. : · · · ·	hernev
registered agent and/or the new registered office address here:	المسرم	امتند. ا
·	78 17	
Name of New Registered Agent:	·4 ?:	·
New Registered Office Address:	6	
	orida 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Type of Action **Title** Name <u>Address</u> 1900 Sunset Harbour Dr ■ Add Alexander Gamarnik MGR **Suite 1607** Miami Beach, FL 33139 □ Add _□ Remove ___ 🗆 Add ☐ Remove 2014 _□ Remove ☐ Remove

. II AIIICIIG	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	4.
(The effective	date, if other than the date of filing: (optional) e date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after s document is filed by the Florida Department of State)
Dated <u>Ja</u>	2014 (lp).
	Signature of a member or authorized representative of a member
	Alexander Gamarnik

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Filing Fee: \$25.00

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