

L13000011345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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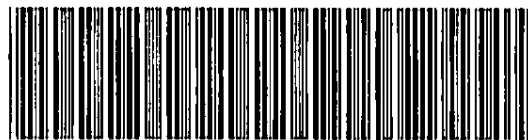
(Business Entity Name)

(Document Number)

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18 JAN 22 PM 1:12
TALLAHASSEE, FLORIDA

S. WARREN

JAN 25 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROCKVIEW FINANCIAL, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEITH W YOUNG
Name of Person
ROCKVIEW FINANCIAL, LLC
Firm/Company
515 STONEBURY DR.
Address
SOUTHLAKE, TEXAS 76092
City/State and Zip Code
1KWYOUNG@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEITH W YOUNG at (682) 230-2201
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

ROCKVIEW FINANCIAL, 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 Company were filed on January 23, 2013 and assigned Florida document number 113000011345.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NATIONAL RETIREMENT BENEFITS, LLC

The new name must be distinguishable and contain 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)

SIS STONEBURY DR

SOUTH LAKE, TX 76092

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SIS STONEBURY DR.

SOUTH LAKE TX 76092

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

STEPHEN A YOUNG

New Registered Office Address:

1818 ROOMAN ST

2H

Enter Florida street address

HOLLYWOOD

City

Florida

33020

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.

Stephen A Young
If Changing Registered Agent, Signature of New Registered Agent

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CLERK OF THE
STATE
OF FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
MGR	KEITH W YOUNG	515 STONEBURY DR.	<input checked="" type="checkbox"/> Add
		SOUTH LAKE TX 76092	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PAULA COMPETELLI	3009 NORTH FIELD DR.	<input checked="" type="checkbox"/> Add
		TARPON SPRINGS	<input type="checkbox"/> Remove
		FL 34688	<input type="checkbox"/> Change
MGR	TONY COMPETELLI	3009 NORTH FIELD DR.	<input checked="" type="checkbox"/> Add
		TARPON SPRINGS	<input type="checkbox"/> Remove
		FL 34688	<input type="checkbox"/> Change
AMBR	STEPHEN YOUNG	1818 ROOMAN STREET	<input checked="" type="checkbox"/> Add
		2H	<input type="checkbox"/> Remove
		HOLLYWOOD FL 33020	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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CLERK OF COURT
HOLLYWOOD

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated January 17 . 2018

Keine w 4-6

Signature of a member or authorized representative of a member

Kathy W Young

Typed or printed name of signee

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18 JAN 22 PM 11:12
FBI - MEMPHIS