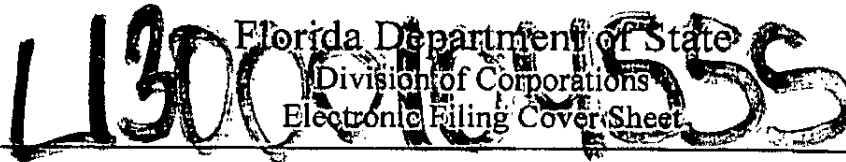


Division of Corporations

Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : ROBERTS, SEWARD & COMPANY PA
Account Number : I20040000178
Phone : (813) 225-1040
Fax Number : (813) 250-1555

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Katrina@rsdpa.net

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RKR MANAGEMENT, LLC**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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D. SCOTT
MAY 26 2017

H 1700 0142 7733

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RKR Management 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 July 24, 2013 and assigned
Florida document number L13000104555.

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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2002 E. 5th Ave,

(Principal office address **MUST BE A STREET ADDRESS**)

Tampa, FL 33605

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

**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:

Kevin McGuinness

New Registered Office Address:

2002 E. 5th Ave,

Enter Florida street address.

Tampa

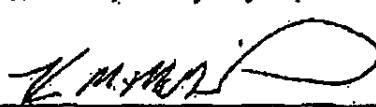
City

Florida 33605

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

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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	Kevin McGuinness	2002 E. 5th Ave.	☐ Add
		Tampa, FL 33605	☐ Remove
			☐ Change
MGR	Ryan McGuinness	PO Box 6372	☐ Add
		Tampa, FL 33508	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

E. Effective date, if other than the date of filing: 4/5/17 (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 805.020(2)(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 4/5/17

Kevin M. McGuinness

Signature of a member or authorized representative of a member

Kevin M. McGuinness

Typed or printed name of signer

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