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COVER LETTER

TO: Registration Solution of Col			
	RAROTH LLC	•	
SUBJECT:	Name of Limited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.		
Please return all correspo	ondence concerning this matter to the following:		
	Joshua Wilcox		
	Name of Person		
	One of Us, LLC		
	Firm/Company		
	337 S Plant Ave		
	Address	 to	202
	Tampa, FL 33606		1924 JAN 30
	City/State and Zip Code		30 ,
	jwilcox@soleconsultingpartners.com E-mail address: (to be used for future annual report notification)		# 1
For further information of	concerning this matter, please call:		MH II: 10
Joshua Wilcox	813 605-9239 at ()		
Name o	of Person Area Code Daytime Telephone	Number	-
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	Certificate of Status Certified Copy (additional copy is enclosed)	60.00 Filing Fo Certificate of Si Certified Copy additional copy is	tatus &

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RARO-	TH. LLC		
(<u>Name of the Lim</u>	ited Ciability Company as it n (A Florida Limited Liability C	ow appears on our records.) ompany)	
The Articles of Organization for this Limited I Florida document numberL\3000/5\\$5		ed on 11/12/2013	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability con	ipany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:			7
(Mailing address MAY BE A POST OFFICE	<u></u>		f %
B. If amending the registered agent and/or		on our records, <u>enter the i</u>	name of the new registered
agent and/or the new registered office addr	ess nere:		
Name of New Registered Agent:	Joshua Wilcox		
New Registered Office Address:	337 S Plant Ave		
	Татра	. Florida	33606
	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Joshua Wilcox	337 S Plant Ave, Tampa, FL 33606	■ Add
			□Remove
			□ Change
MGR	Randy Speed	337 S Plant Ave, Tampa, FL 33606	□ Add
			■Remove
			Change
			Add Remove
			Change
			Remove
			Change
			□Add
			Remove
			□Change
			□ Add

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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date ote: If the date inserted in this block does not meet the applicable s ocument's effective date on the Department of State's records.	of filing or more than 90 days after	ional) er filing.) Pursuant to 605 iis date will not be liste	.020 ed as
record specifies a delayed effective date, but not an effective time, at is filed.	12:01 a.m. on the earlier of: (b)—The 90th day after	r the
signature of a member or authorized			
Jash Wilcay Signature of a member or authorized	representative of a member		
Signature of a member or authorized	epresentative of a member	•	