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JUN 05 2014 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RTC 76, LLC Name of Limited Liability Company
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:
Deborah Dittrich Name of Person
RTC 76, LLC Firm/Company
1440 Lodge Terrace
Deltona, FL 32738 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Deborah Diffrich at (407) 221-2554 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$ 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

RTC 76, LL (Name of the Limited Lin (A Flo	ability Company as it now appears on our orda Limited Liability Company)	records.)		
The Articles of Organization for this Limited Liabili	ty Company were filed on $\frac{3/20}{557}$.)/14a	nd as:	signed
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liability company here:			
The new name must be distinguishable and end with the words	"Limited Liability Company," the designati	ion "LLC" or the abbrevi	alion "	L.L.C.
Enter new principal offices address, if applicable	<u> </u>			
(Principal office address MUST BE A STREET Al	DDRESS)		7	<u> </u>
			<u>=</u> _	<u> </u>
			1	作品 開某m
Entenness mailing address if applicables			2	्रोके ल शेन्द्रम
Enter new mailing address, if applicable:				*1 *1 *** *2 *1 ** 24 ***
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>			1344
				<u>,</u>
B. If amending the registered agent and/or r registered agent and/or the new registered office		records, <u>enter the</u>	name	of the new
Name of New Registered Agent:			_	
New Registered Office Address:	Enter Florida stree	ot address		
	Liner I Wildu Siree	., MMM, CDJ		
_	0	, Florida	o Code	
	City	Zij	coae	

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

<u>Title</u>	Name	Address	Type of Action
Pres./Dwnr	Deborah DITTRICH	1440 Lodge Terrace	Add
		1440 Lodge Terrace Deltona, FL 32738	□ Remove
			□ Add
			☐ Remove
·			DIVERSION OF THE JUN -2
			Add Add
			□ Remove
			□ Add
			□ Remove

D. If amend	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	I didn't List myself as under the authorize	ed
· <u>D</u>	busons. Bank needs it corrected for	
$\overline{\omega}$	ry account with them	
		
(The effective	e date, if other than the date of filing:(optional) ive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after his document is filed by the Florida Department of State)	
Dated	may 29, 2014.	
	Deborah Dettrice	
	Signature of a member or authorized representative of a member	
	DEBORAH DITTRICH Typed or printed name of signee	
	Lyned or printed name of signee	

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Filing Fee: \$25.00

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