

L14000061787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

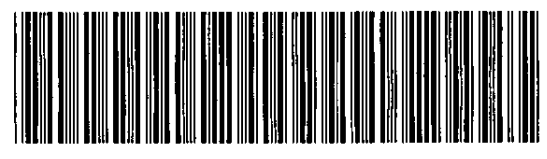
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/19/14--01003--023 **25.00

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SECRETARY OF STATE
OFFICE OF CORPORATE
2014 SEP 19 PM 2:38
TO BE FILED
SUFFOLK COUNTY
SUFFOLK COUNTY DEPT OF FILING

RECEIVED
AND
FILED
14 SEP 19 PM 2:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

K. SALY
EXAMINER
SEP 19 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Real Runnerz 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:

Ruben Sanchez Sr.
Name of Person

Real Runnerz LLC
Firm/Company

14206 SW 290 Ter.
Address

Homestead FL 33033
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ruben Sanchez at (786) 298-9151
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Real Runnerz LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

APPROVED
FILED
14 SEP 19 PM 2:48

SECRET
TALLAHASSEE
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/15/2014 and assigned
Florida document number L14000061787.

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 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)

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:

New Registered Office Address:

Enter Florida street address

City

Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Ruben Sanchez Sr.	Ruben Sanchez Sr.	<input checked="" type="checkbox"/> Add
		14206 SW 290 Ter.	<input type="checkbox"/> Remove
		Hbmestead FL 33033	
AR	Ruben Sanchez	Ruben Sanchez	<input type="checkbox"/> Add
		14206 SW 290 Ter.	<input checked="" type="checkbox"/> Remove
		Hbmestead FL 33033	
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

14 SEP 19 PM 2:45
TALLAHASSEE
FLORIDA
COUNTY
CLERK
OFFICE

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

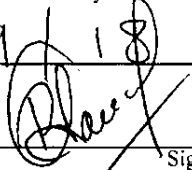
E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

09/18/2014

A



Signature of a member or authorized representative of a member

Ruben Sanchez Sr.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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