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of 4/14/2022

COVER LETTER

		istration Sec sion of Corp			
CUBIC	CVI.		ULTING LLC		
SUBJEC	Name of Limited Liability Company				
			Amendment and fee(s) are sub		
		·	RICARDO A DIAZ	ū	
				Name of Person	
			RDZ CONSULTING LLC		
				Firm/Company	
			8912 NW 10TH STREET		
		Address			
			PEMBROKE PINES, FL	3024	
			Ricardo.diaz001@gmail.co	City/State and Zip Code	
			-	o be used for future annual report n	otification)
For furth	ner in	formation co	oncerning this matter, please ca	alt:	
RICARI	DO A	A DIAZ		786 260-7989	
		Name of	Person		ime Telephone Number
Enclosed	is a	check for the	e following amount:		
≡ \$25.	00 F	iling Fec	□ \$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)
		ling Address		Street Address: Registration S	Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

RDZ CONSULTING LLC

2022 HAR 30 AM 9: 42

(Name of the Limited Liability Company as it now appears on our records.) SECRE The Articles of Organization for this Limited Liability Company were filed on $\frac{05-09-2014}{1}$ and assigned Florida document number L14000075766 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RDZ ENGINEERING, 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) 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

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, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Membe

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			Remove
			□ Change
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			□Remove
			□Change

Han	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effec	tive date, if other than the date of filing: (optional)
(If an e	ffective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
he reco	ord 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 iled.
Dated	03-28-22 , 12:01 AM
	Signature of a member or authorized representative of a member
	RICARDO A DIAZ