L1400084209

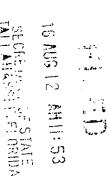
(Re	questor's Name)	,
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COVER LETTER

Division of Corpo	rations		•
SUBJECT: R	2R Service	s of the Gult	Coast LLC
·	Name of Limit	ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are subn	nitted for filing.	
Please return all correspond	ence concerning this matter t	o the following:	
	Jon-M	Name of Person	-5
		Name of Person	
	RIR S	Firm/Company	bulf Coast LLC
		Firm/Company	
	PO BOX	4532 R	
		Address	
	Pensad	ola, FL 32507	7
	Rest 21	City/State and Zip Code Rulax (Yahuu. Co be used for future annual report notifi	- OM
	E-mail address: (t	o be used for future annual report notifi	cation)
For further information con	cerning this matter, please ca		
Jon-Mich	acl Jones	at (850) 380-5 Area Code Daytime	5/0
Name of F	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	\$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)

MAILING ADDRESS:

TO:

Registration Section

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

R R Scrvices of the Limited Liability Company as it now appears on our records.)

(Name of the Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5-27-2014 and assigned Florida document number L14000084209.

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:

(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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

, Florida

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 = Mar AMBR = Aut	nager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Chardler Bentley	1813 Bl-klay Ava	ddd
	,	Pensacola, FL 3250;	
			Change
<u>AMB</u> R	Brandon Collier	1813 Blakley Ave	Add
		Persacole, FL 32507	□ Remove
			Change
AMBR	Konnoth Larrivee	2900 W/Larua St	Add
		Pensacula, FL 3250)	□ Remove
			Change
			Add
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TL ~	Oth day after th	he record is file	ed.				
		/))	2016				
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	August	- //		-· ->			
	August			ized representative o	f a member		
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	August	Signature o	Comember or author		f a member	6 AUS 12 A	
	August	Signature o	Comember or author	ized representative of	f a member	6 AUS 12 A	Ti

Filing Fee: \$25.00