L14000121924

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T. MATTHEWS MAR 29 2022

COVER LETTER

	Registration Sec Division of Corp			
OVER VEGO	RTZ INT LI			•
SUBJEC	T:	Name of Limi	ted Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
		Eric T. Salpeter, Esq.		
			Name of Person	
		Salpeter Gitkin, LLP		
			Firm/Company	
		3864 Sheridan Street		
			Address	
		Hollywood, FL 33021		
			City/State and Zip Code	
		Eric@salpetergitkin.com		
For furth	er information c	E-mail address: (oncerning this matter, please of	to be used for future annual report no all:	unication)
Simona l			954 467-8622	
Name of Person		at () Area Code Daytii	me Telephone Number	
Enclosed	l is a check for th	he following amount:		
≅ ·\$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration S	ection	
	Division of C	Corporations	Division of Co	orporations
	P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RTZ INT LLC

22 HAD 17 TH 9: 25

(Name of the Limited Liab (A Flor	oility Company as it now appears on our records ida Limited Liability Company)	<u>-</u>
The Articles of Organization for this Limited Liability Torida document number \(\frac{\text{L14000121924}}{\text{L14000121924}}\)		and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
he new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC"	" or the abbreviation "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADI	DRESS)	
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or register gent and/or the new registered office address here		the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres.	S
	, Flo	orida

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 Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Officer	Javi Corti	6538 Collins Ave. #173	□Add
		Miami Beach, FL 33141	■Remove
			□Change
AMBR —	Javier Corti	6538 Collins Ave. #173	≅Add
		Miami Beach, FL 33141	□ Remove
			Change
			□Add
			Remove
			□Change
			🗖 Add
			□Remove
			Change
			□Add
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			Change
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	nust be specific and cannot be prio block does not meet the appli	r to date of filing or more than 90 day cable statutory filing requiremen	
e record specifies a delayed effec rd is filed.	tive date, but not an effective t	ime, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
March 4	2022		
Dated		<u> </u>	
	MAN		
	Signature of a member or auth	norized representative of a member	···