14000128579

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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JUL 14 2017

COVER LETTER

	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ELVIRA ACOSTA		
		Name of Person	.
	ELVIRA ACOSTA ENRO	DLLED AGENT INC.	
		Firm/Company	
	401 CORAL WAY SUITE	E 107	
		Address	
	CORAL GABLES FL 331	34	
		City/State and Zip Code	
	TAXMASTER@BELLSO		78 3
	E-mail address: (to be used for future annual report notific	
for further information c	concerning this matter, please co	att:	
ELVIRA ACOSTA		305 541-9333	MAC W
Name (of Person	at () Area Code Daytime	Telephone Number (7.6)
Enclosed is a check for t	he 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 Division of Corporations

> 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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RCTECK ARCHITECTURE & ENGINEERING LLC

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

(A Florida Limited	(Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.14000128579}{1.14000128579}$.	y were filed on <u>8/15/2014</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility 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 registered agent and/or the new registered office address he		ERCLAYAY GENERAL SERVICE SERVICES SERVI
Name of New Registered Agent:		
New Registered Office Address:	Enter Florula street address	
	Enter Florida Street address	
	, Flo	rida
Non-Basing at Assert Cinnelling if the same Desired Assert	City	zipx oue

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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

. If amonding 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>	Address	Type of Action
MGR	JOHN SACCO	2615 SW 20 Street	⊒ Add
		Miumi F1, 33145	☐ Remove
			☐ Change
			Add
			□ Remove
		*···	□ Change
			□ Add
		☐ Remove	
			☐ Change
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	for the state of the state of t	02
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(If an effec	date, if other than the date of filing:	int to 605,02 I be listed
docume	t's effective date on the Department of State's records.	
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the Oth day after the record is filed.	e earlier
Dated _	July 3 / 1 2017.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00