## L14000178735

(Re	questor's Name)			
(Ad	dress)			
(Address)				
(Cir	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



500275489115

07/29/15--01015--003 \*\*25.00

15 JUL 29 PH I2: 03
SECRETARY OF STATE AND ANASSEF, FLORIDA

JUL 2071的

1928 31 3

## **COVER LETTER**

	ision of Cor					
SUBJECT:	R&L Group	o, LLC				
SUBJECT.		Name of Lim	ited Liability Company			
The enclosed	d Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Rafael J. Schuck				
		Name of Person				
	R&L Enterprises, Inc.					
		-	Firm/Company	<u> </u>		
		16400 Loch Ness Lane				
		Address				
		Miami Lakes, FL 33014				
	City/State and Zip Code					
		rlschuck@bellsouth.net				
		E-mail address: (	to be used for future annual report not	ification)		
For further i	nformation c	oncerning this matter, please ca	all:			
Rafael J. Sc	huck		305 812-1914			
	Name o	f Person		ne Telephone Number		
Enclosed is	a check for th	ne following amount:				
■ \$25,00 E	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
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&L Group, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 11/12/2014 Florida document number  $\frac{L14000178735}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: R&L SCHUCK CPAS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 6165 MIAMI LAKES DR - EAST Enter new principal offices address, if applicable: MIAMI LAKES, FL 33014 (Principal office address MUST BE A STREET ADDRESS) 16400 LOCH NESS LANE Enter new mailing address, if applicable: MIAMI LAKES, FL 33014 (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 , Florida <sub>-</sub> City

## New Registered Agent's Signature, if changing Registered Agent:

Ċ

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 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	
			Remove	
			□ Change	
			□ Add	
			Remove	
			Change	
<del></del>			Add	
			Remove	
			□ Change	
			Add	
		4-44-4-4	_ □ Remove	
			☐ Change	
			Add SEC	
			Change T	
			F STAR	
			Dm ⊗  P Remove	
			Change	

P. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if neces.	sary.)
·	· · · · · · · · · · · · · · · · · · ·	
	1	
		<del>.</del>
		·····
		<u> </u>
Dec	And the standard of the control of t	D.
(If an effecti Note: If	date, if other than the date of filing:  (option we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fit the date inserted in this block does not meet the applicable statutory filing requirements, this day's effective date on the Department of State's records.	ling.) Pursuant to 605.0207 (3)(b
	d specifies a delayed effective date, but not an effective time, at 12:01 a.r Oth day after the record is filed.	n. on the earlier of:
Dated	July 24, , 2015	
	Talael Schuid	SECTION TO
	Signature of a member or authorized representative of a member	五 2
	Rafael J. Schuck Typed or printed name of signee	SSEE PROPERTY OF THE PROPERTY
	Typed or printed name of signee	29 PM 12: 03 LASSEE, FLORIE
		65 3

Page 3 of 3

Filing Fee: \$25.00