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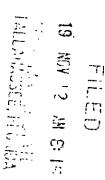
 	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	status
Special Instructions	s to Filing Officer:	





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DEC 11 2019 S. YOUNG

COVER LETTER

TO: Registration Division of C			
RM HOL SUBJECT:	DING USA, LLC		
	Name of Li	mited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
	Maurilio S Gonzalez		
	RM Holding USA, LLC	Name of Person	4
	1924 Starboard Way	Firm/Company	
	Fruit Cove, FL 32259	Address	
	ricardo.campos@rioorinoco	City/State and Zip Code o.com	
		to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
Maurilio S Gonzalez		at (904) 325-6851	
Name	of Person		Telephone Number
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 tadditional copy is enclosed

MAILING ADDRESS:

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

RM Holding USA, LLC			ASS 12
(Name of the Lim	i <mark>ted Liability Con</mark> (A Florida Limit	npany as it now appears on ed Liability Company)	our records:)1.
The Articles of Organization for this Limited I	Liability Compa	my were filed on $\frac{02/107}{2}$	2015 and assigned
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited li	ability company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Li	ability Company," the design	nation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE	EBOX)		
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered office address h	office address on ou ere:	r records, <u>enter the name of the ne</u> y
Name of New Registered Agent:	N/A	,	
New Registered Office Address:	N/A		
		Enter Florida s	treet address
	N/A		, Florida ^{N/A}
		City	Zip Code

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Rio Orinoco Oil, C.A.	Av. Jorge Rodriguez Local 1. Sector Isla de Cuba, Pto, La Cruz	<u></u> ■ Add
	<u> </u>	Anzoategui, 6023, Venezuela	
			□ Remove
			Change
N/A	N/A	N/A	Add
			Ndd
			□ Remove
			Change
			□ Add
			☐ Remove
			Change
			Add
			□ Remove
			Change
			D Add
			Remove
			Change
			Add
		Remove	
			Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ,N/A
(If an el <u>Note:</u>	ive date, if other than the date of filing:(optional) fective 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 (3) 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.
f the re b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
Dated	October 17 2019
	Signature of a member or authorized representative of a member
	Maurilio S Gonzalez Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00