Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000394103 3)))



H240003941033ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VENERABLE CORPORATE AND TRUST SERVICES, LLC

Account Number : I20210000107 : (813)284-4727 Phone Fax Number : (813)436-8460

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.∗∗

notices@venerable.law Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN R & R DEVELOPMENT LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

DEC - 3 2024

To:

COVER LETTER

| TO: | Registration Se Division of Cor | | | |
|---------|------------------------------------|---|--|---|
| CU:D IF | | /ELOPMENT LLC | | |
| SUBJE | .CI: | Name of Lim | ited Liability Company | |
| The en | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please | return all correspo | ondence concerning this matter | to the following: | |
| | | JASON SAMPSON | | Daytime Telephone Number S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | Name of Person | |
| | | Venerable Corporate and T | rust Services, LLC | |
| | | | Firm/Company | |
| | | 301 West Platt Street, No. | 657 | |
| | | | Address | |
| | | Tampa FL 33606 | | |
| | | <u></u> | City/State and Zip Code | |
| | | jsampson@venerable.law | | |
| | | E-mail address: (| to be used for future annual report noti | fication) |
| For fur | ther information c | oncerning this matter, please c. | all: | |
| Jason S | Sampson | | 813 284-4727 | |
| | Name o | f Person | Area Code Daytim | e Telephone Number |
| Enclose | ed is a check for th | ne following amount: | | |
| ■ \$2: | 5.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy |
| | Mailing Addres | :s: | Street Address: | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassec
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To:

2024-12-02 21:40:26 GMT

18134368460

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED
2021 DEC-2 PH 5:21

FALLAHASSEE, FLORID!

R & R DEVELOPMENT 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 L | iability Company | were filed on 02/11/2015 | and assigned |
|---|--|-------------------------------------|---|
| Florida document number L15000026388 | . | | |
| This amendment is submitted to amend the foll | owing: | | |
| A. If amending name, enter the new name o | f the limited liab | oility company here: | |
| The pare name must be distinguishable and contain the n | cords 'Il imited Linki | dity Company" the designation "I I | C" or the abbreviation "L. L. C." |
| The new name must be distinguishable and contain the v | votus Limacu Claoi | | |
| Enter new principal offices address, if applicable: | | | 1, NO 657 |
| (Principal office address MUST BE A STREE | trenter the new name of the limited liability company here: Senter the new name of the limited liability company here: Senter the new name of the limited liability company here: Senter the new name of the limited liability company," the designation "LLC" or the abbreviation "LLC." Senter the new name of the limited liability company," the designation "LLC" or the abbreviation "LLC." Senter the new name of the limited liability company here: Senter the new name of the abbreviation "LLC." Senter the name of the new registered name of the new registered egistered agent and/or registered office address on our records, enter the name of the new registered egistered agent and/or registered office address here: Senter the name of the new registered name of the new registered agent and the new registered egistered Agent: Senter the name of the new registered name of the ne | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | | 301 WEST PLATT STREE | T, NO 657 |
| (Mailing address MAY BE A POST OFFICE BOX) | | TAMPA, FL 33606 | |
| | | | |
| | | | |
| ** ** | • • | address on our records, <u>ente</u> | r the name of the new registered |
| agent and/or the new registered office addre | ss nere: | | |
| | VENERARIE | CORPORATE AND TRUST: | SERVICES LLC |
| Name of New Registered Agent: | VENERABLE CONFORATE AND THOST SERVICES LEG | | |
| New Registered Office Address: | 301 WEST PL | | |
| - | | Enter Florida street addr | ens . |
| | TAMPA | , F | lorida |
| | | City | pany," the designation "LLC" or the abbreviation "L.L.C." WEST PLATT STREET, NO 657 PA, FL 33606 WEST PLATT STREET, NO 657 PA, FL 33606 s on our records, enter the name of the new registered ORATE AND TRUST SERVICES LLC TREET, NO 657 Enter Florida street address Florida 33606 |

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.

f Changing Registered Agent, Signature of New Registered Agent

Page: 4 of 5

2024-12-02 21.40:26 GMT

18134368460

From: Venerable Law Firm HZ4UUU394 TU3 3

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 |
|--------------|----------------------------|-----------------------|--------------------------------|
| MGR | RIVERA, DAVID | 5072 WHITEWATER WAY | |
| | | SAINT CLOUD, FL 34771 | ■Remove |
| | | | □Change |
| MGR | David Rivera | 5072 WHITEWATER WAY | 🖸 Add |
| | | SAINT CLOUD. FL 34771 | ■ Remove |
| | | | □Change |
| MBR | Savjerjac Investments, LLC | 75 E 3rd St Ste 7 | ■Add |
| | | Sheridan, WY 82801 | □Remove |
| | | | □Change |
| | | | Add 2024 Prove - 2 ge Ph 5: 21 |
| | | | ☐Remove ☐Change |
| | | | □Add |
| | | | □Remove |
| | | | Change |

18134368460

| amending any other informati | on, enter change, | ij nere. (maen | tititi om mes | , , , , , , , , , , , , , , , , , , | , | |
|---|-------------------------|---------------------|--|---|---|--------------------------|
| | | | | | . | |
| <u> </u> | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | · · | <u> </u> | | |
| | | | | <u></u> | | |
| | | | | | | |
| | | | | | | |
| | | <u></u> | _ . | | | • |
| | | | | | ····· | • |
| | | | <u></u> . | <u> </u> | TA SE | |
| | <u> </u> | | | | Prof. | 4 |
| | | | | | E E | 7 - 2 PM |
| | | , | | | 25. | ~ <u>~</u> |
| | | | | | | 2 PM 5:21 |
| | | - | | - | <u>, , , , , , , , , , , , , , , , , , , </u> | 2 |
| | | | _ | | | - |
| | | | | | | _ |
| | - - | | | | | |
| | | | | | | - |
| | | | | | | - |
| ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this bloocument's effective date on the De | ock does not meet the | e applicable statut | ling or more than 90 ory filing requires | (optional) days after filingments, this date |) 2.) Pursuant to 60 e will not be lis | 5.0207 (3) ted as the |
| record specifies a delayed effective Lis filed. | : date, but not an effe | ective time, at 12: | If a.m. on the ear | rlier of: (b) T | he 90th day afte | er the |
| December 2 | 2024 | ı | | | | |
| December 2 | | · | | | | |
| fason Sam | Ason | | | | | |
| | Signature of a member | or authorized repre | sentative of a mem | ber | | |
| | | | | | | |