L15000070953

(F	Requestor's Name)	<u> </u>
(<i>P</i>	Address)	
(F	Address)	
	City/State/Zip/Phone #/	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(<u>[</u>	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
CEIVED JULI MEST	see, norlda	
10 T C E	Office Use Only	



000301064210

07/12/17--01088--008 **25.00



JUL 13 2817 J CHIVEMS

COVER LETTER

TO: Registration Se Division of Cor			
INVERSIO	NES RSR59CA LLC		
SUBJECT:	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:	
	MIGUEL'S RODRIGUEZ		
	Mi	7 Name of Person	
	-	Firm/Company	
	352 FAIRWAY CIR		
		Address	
	WESTON, FL 33326		
	miguelsrh@gmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information e	oncerning this matter, please c	all:	
MIGUELS RODRIGUE	<u></u>	954 5560041 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

i	INWI	FRSIONE	く ひぐひる	OCA T	117

INVERSIONES RSR.M.A ELC		
(Name of the Lim	ited Liability Company as it now appears on our record (A Florida Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Florida document number 47-3805246	Liability Company were filed on	and assigned
This amendment is submitted to amend the fol		
	-	
A. If amending name, enter the new name	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC	"O" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
	d/or registered office address on our record	is, enter the name of the new
registered agent and/or the new registered of	office address here:	
Name of New Designand Assure	MARIA S AGUILAR	<u>,</u>
Name of New Registered Agent:	352 FAIRWAY CIR	
New Registered Office Address:	Enter Florida street addre	
	WESTON, FI	lorida Zin Coda
New Registered Agent's Signature, if changing		sup Civilia
		7
provisions of all statutes relative to the pro- accept the obligations of my position as res		nd rum familiar with and FIS Or, if this document is not the limited limbility
	If Changing Registered Agent, Signature	of New Registered Agent

Page 1 of 3

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>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARIA S AGUILAR	352 FAIRWAY CIR, WESTON FL	Add
			☐ Remove
			Сћалде
			Add
			☐ Remove
			☐ Change
			□ Remove
			Change
			Remove
			□ Change
			Remove
			□ Change
			Add
			□ Remove

_□ Change

	<u> </u>
	<i>₽</i> # <u>=</u> :
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	227
	28
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing.	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of filu <u>Note:</u> If the date inserted in this block does not meet the applicable statutor	ng or more than 90 days after filing) Pursuant to 605 ry filing requirements, this date will not be list
locument's effective date on the Department of State's records.	y ming requirements, this date with the occusion
e record specifies a delayed effective date, but not an effec The 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlie
(17-(Yr-17	
Dated	
A. hall	

Page 3 of 3

Typed or printed name of signec

Filing Fee: \$25.00