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| (Re | equestor's Name) | | | |
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| (Ad | dress) | | | |
| (Ad | ldress) | <u> </u> | | |
| (Cit | ty/State/Zip/Phon | ne #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

| Division of Corp | porations | ₹ | ,,, | |
|-----------------------------|---|--|--|---------------|
| SUBJECT: RG | Executive Ti | ransportation, L.L ited Liability Company | _C. | |
| | Name of Limi | ited Liability Company | | • |
| | | | | |
| The enclosed Articles of A | Amendment and fee(s) are sub- | mitted for filing. | | |
| Please return all correspor | ndence concerning this matter | to the following: | | |
| | Richard | Cardner Tr. Name of Person | | ., |
| | 2.2 | | | |
| . • | KG Execu | tive Transpor ta | tion, LLC | |
| 1 40 | 10060 Wat | Hermark Lane Address | W | |
| | | | | |
| | Jacksonvill | City/State and Zip Code ort @ Gmail Com to be used for Where annual report noti | | |
| | | City/State and Zip Code | | |
| | RG EX Trans | to be used for White annual report note: | fication) | |
| | oncerning this matter, please ca | | | |
| Kanal | | 044 004 | 0000 | |
| Name of | Person | at (<u>303</u>) <u>324 -</u> Area Code Daytim | e Telephone Number | wadd spinang. |
| | · · · · · · · · · · · · · · · · · · · | e e Cel | | |
| Enclosed is a check for th | e 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 Certificate of Certified Co (additional cop | of Status & |
| | | | | |

MAILING ADDRESS:

TO: Registration Section

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**

| RG Exercutive 7 (Name of the Limited Liability Co. (A Florida Lin | ransportation LLC |
|--|--|
| (<u>Name of the Limited Liability C</u> (A Florida Lin | Company af it now appears on our records.) mited Liability Company) |
| The Articles of Organization for this Limited Liability Com | pany were filed on 5/15/15 and assigned |
| Florida document number <u>L/50000 86.345</u> . | |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited | l liability company here: |
| RG Executive Transportation | Liability Company," the designation "LLC" or the abbreviation "L.L.C." |
| The new name must be distinguishable and contain the words. Limited | |
| Enter new principal offices address, if applicable: | 10060 Watermark Lane W |
| (Principal office address MUST BE A STREET ADDRES | Jackson ville, FL 32256 |
| · | |
| Enter new mailing address, if applicable: | 10060 Watermark LN.W. |
| (Mailing address MAY BE A POST OFFICE BOX) | Tackson ville, FL 3-2256 |
| | |
| B. If amending the registered agent and/or registere registered agent and/or the new registered office address | ed office address on our records, enter the name of the new s here: |
| Name of New Registered Agent: | |
| New Registered Office Address: 1006 | O Water mark LN W Enter Florida street address |
| Jac | Kson Ville , Florida 32256 City Zip Code |
| | City Zip Code |
| New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered Regi | gent: |

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, E.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

| • | on, enter change(s) here: (Attach additiona | · |
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| ote: If the date inserted in this block ocument's effective date on the Depa | ffective date, but not an effective time | quirements, this date will not be listed a |
| ated 10/27 | 15 | |
| Liebour H | mature of a member or authorized representative of a | member Con Con |
| Richard | H Gardner Jr. Typed or printed name of signee | BELLAR 2 |
| | Typed of primed name of signee | T A ID: |

Filing Fee: \$25.00