2/19/22, 1:15 PM

Division of Corporations

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H210000660473AB/1.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GFS TAX & ACCOUNTING SERVICES

Account Number : 120140000089 Phone : (754)301-2128 Fax Number : (954)252-4650

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

Email Address: NFC @ GFSTAXACCT.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **RMSR LLC** 

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## 422000060473

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#### **COVER LETTER** -

	Registration Division of C			
eun rec	RMSR L	rc		
SUBJEC	JI:	Name of Lin	nited Liability Company	
The encl	osed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corres	pondence concerning this matter	to the following:	
		JULIANA MACHADO, O	CPA	
			Name of Person	
		GFS TAX & ACCOUNTI	NG SERVICES	
			Firm/Company	
		11764 W SAMPLE RD ST	TE 102	
			Address	<del></del>
		CORAL SPRINGS, FL 33	065	
			City/State and Zip Code	
		INFO@GFSTAXACCT.CC		
		E-mail address: (	to be used for future annual report not	ification)
For furth	er information	concerning this matter, please c	all;	
JULIAN.	A MACHAD	O, CPA	754 301-2128 at ()	
	Name	of Person		ne Telephone Number
Enclosed	is a check for	the following amount:		
□ \$25.6	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addr		Street Address:	
	Registration Division of	Section Corporations	Registration Se Division of Con	
]	P.O. Box 63	327	The Centre of	
	Tallahassee	, FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

H22000060473

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RMSR LLC					
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)		_		
The Articles of Organization for this Limited Liability Company we Florida document number L15000111864	vere filed on 06/29/2015	and	assign	ned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ty company here:				
DYSERTH ESTATES LLC					
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the a	bbreviation	"L.L.C	<del></del>	
Enter new principal offices address, if applicable:				· <del>-</del> ·	
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
		<u></u>			
				•	
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, enter the nar	ne of the	uem L	egister	<u>ea</u>
Name of New Registered Agent:		· •	2		
Madie of New Nephyleton Agent.					
New Registered Office Address:	Enter Florida street address		<u>ක</u>		
		:::			
<del> </del>	, Florida	Zip Co		1 1	
	City	ان <i>وبري</i> - زادجي		_	
New Registered Agent's Signature, if changing Registered Agent:		<u>Ç</u> 44	Ω Ö		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am ovided for in Chapter 605, F.S. Or	familiar ; if this d	with a	and	he

If Changing Registered Agent, Signature of New Registered Agent

# Ha2000060433

\_ DRemove

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
AMBR	ANDRE S ROCHA	17046 WANDERING WAVE AVE	⊟∧dd
		BOCA RATON, FL 33496	□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
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			□Remove
			☐ Change
<del> </del>			□Add

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lf amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
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*****	
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_	
_	
<u>Note:</u> I	re date, if other than the date of filing:
record d is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	Flems Mylis
	Signature of a member or authorized representative of a member
	FLAVIO ALVES DA ROEHA