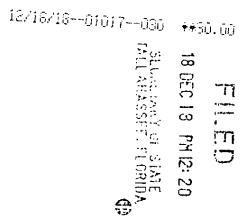
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## **COVER LETTER**

	egistration Sectivision of Corp			
eun iren		gerial Investment Services, LLC	C	
SUBJECT	ı:	Name of Limi	ited Liability Company	
The enclos	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		Ronald C Sanders		
			Name of Person	
			Firm/Company	<del></del>
		9800 Perfect Drive		
			Address	
		Port St Lucie, Florida 3498	36	
			City/State and Zip Code	
		ronaldsndrs@yahoo.com	to be used for future annual report notifi	estion)
For further	r information co	oncerning this matter, please ca		carn,
Ronald C			703 232-3700 at ()	
	Name of	F Person	Area Code Daytime	Telephone Number
Enclosed i	s 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 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
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RCS Managerial Investment Services, LLC	•	
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number 1.15000180047	y were filed on 11/22/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liah	oility Company," the designation "LLC" or	the althreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		D : 20 H
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he Name of New Registered Agent:	_	nter the name of the
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	, Florid	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Title** <u>Name</u> <u>Address</u> Type of Action \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change Da≴dd **⊘**Add ☐ Remove \_□ Change \_ 🗆 Add \_□ Remove \_□ Change □ Add ☐ Remove ☐ Change

me	embers. This is the 2nd Amendment to the original filing. This amendment designates Ronald C		
Sa	nders as the sole signatory authority for RCS Managerial Investment Services, LLC.		
Th	is authority includes all monetary and legal matters.		
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Effective	e date, if other than the date of filing:		
Note: If	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date we're effective date on the Department of State's records.		
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. o Oth day after the record is filed.	n the ea	arlier of
Dated _	·		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00