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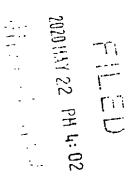
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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05/22/20--01008--025 **25.00



Amend

JUN : 19211 I ALBRITTON

COVER LETTER

TO:

TO: Registration Se Division of Cor					
	GROUP RMDS LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter				
	MANUEL TEJADA SAN	TOS			
		Name of Person			
	SERVICE GROUP RMDS	SILLC			
		Firm/Company			
	900 W LANDSTREET RO	DAD			
		Address			
	ORLANDO FL 32824				
		City/State and Zip Code			
	SERVICEGROUPRMDSL	-			
For further information c	e-mail address: (to be used for future annual report not	inication)		
MANEL TEJADA SAN	•	407 723-3198			
Name of Person		at () Area Code Daytir	ne Telephone Number		
Enclosed is a check for the	ne 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 Addres Registration S		Street Address:	ection		
Division of C			Registration Section Division of Corporations		
P.O. Box 632	.7	The Centre of			
Tallahassee, I	FL 32314	2415 N. Monro	oc Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SERVICE GROUP LLC			
(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Con	appears on our records.) appany)	
	liability Company were tiled	on 11-16-2015 and assigned	
Florida document number H5000193684	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability comp	any here:	
The new name must be distinguishable and contain the	words "Limited Liability Company	"the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREET ADDRESS)		6	
		2 7	
Enter new mailing address, if applicable:		2 2 0	
(Mailing address MAY BE A POST OFFICE BOX)		Ţ.	
		02	
· · · · · · · · · · · · · · · · · · ·	***	our records, enter the name of the new register	
gent and/or the new registered office addre	ess here:		
Name of New Registered Agent:	MANUEL TEJADA SANTOS		
New Registered Office Address:	900W LANDSTREET RO.	AD	
	En	ter Florida street address	
	ORLANDO	. Florida ³²⁸²⁴	

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.

City

f Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
MGRM	JAVIER CHACON	900 W LANDSTREET ROAD ORLANDO FL 32824	_□Add
			_ ≣Remove
			_ 🗆 Change
MGRM	MANUEL TEJADA SANTOS	900 W LAND STREET ROAD ORLANDO FL 3282-	4 _ ≡ Ađd
			_ □Remove
			_ 🗆 Change
			_ □Add
			_ □Remove
			_ □Change
			_ 🗆 Add
			_ 🗆 Remove
			_ 🗆 Change
			_ □Add
			_ □Remove
			_ □Change
			_ □Add
		·	_ □Remove
			□ Change

				
				 ,
				
				
				
ective date, if other than the neffective date is listed, the date must te: If the date inserted in this ble nument's effective date on the De	t be specific and cannot be prior ock does not meet the applic	able statutory filing rec	(optional) han 90 days after filing.) Pu quirements, this date will	rsuant to 605,020; not be listed as
cord specifies a delayed effective s filed.	e date, but not an effective t	ime, at 12:01 a.m. on th	ne earlier of: (b) The 90)th day after the
	2020	<u> </u>		
ed MAY 18				
	Manuel Signature of a member of auth	TIPUM orized representative of a	member	