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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 9, 2017

CORPORATE ACCESS, INC

SUBJECT: RRC HOLDINGS, LLC Ref. Number: L16000020678

We have received your document for RRC HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 317A00002603

Macha

www.sunbiz.org

	INC. 236 East 6th Avenue. Tallahassee, Florida P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800)	
	WALK IN PICK UP: 28/17	
	CERTIFIED COPY	
X	РНОТОСОРУ	
	CUS	
X	FILING Amendment	
	RRC HOLDINGS, LLC	LAII
-	(CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)	ARY OF STATE SECTION OF STATE
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COVER LETTER

TO: Registration S Division of Co					
RRC HO	OLDINGS, LLC				
SUBJECT.	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	Kevin A. Denti, Esq	uire			
	11	Name of Person			
	Kevin A. Denti, P.A.				
	\$10 MIX \$ MIX	Firm/Company			
	2180 Immokalee Ro	oad - Suite #316			
		Address	The specime are to construct the Specimen State Construction are growness.		
	Naples, Florida 341	10		7 FI	TALLAHASSEE, PLURIUM
	- / ·	City/State and Zip Code		FEB -8	
	kdenti@dentilaw.con			တ်	(L)
	E-mail address: (to be used for future annual report notif	ication)	2	<u>.</u> .
For further information of	concerning this matter, please c	all:		9 PH 1: 00	
Kevin A. Denti, Es	quire	239 260-8111		09	(107
Name o	f Person		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 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RRC HOLDINGS, LLC (Name of the Limited ed Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on February 2, 2016 and assigned Florida document number L16000020678 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Phyllis A. Cioffi	3595 Gin Lane	■ Add
		Naples, Florida 34102	□ Remove
-		•	□ Add
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If amending any other information, enter change(s) here: (Attaci	i aaaiiionai sneeis, ij necessary.)
Effective data if other than the data of filing.	(antional)
ffective date, if other than the date of filing: the effective date must be specific, cannot be prior to date of receipt or filed date and the date this document is filed by the Florida Department of State)	(optional) I cannot be more than 90 days after
Dated February 9 2017	
111/At	
Signature of a member or nuthorized repre	sentative of a member
Kevin A. Denti, Esquire	
Typed or printed name of	signee

Page 3 of 3

Filing Fee: \$25.00

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