## 21600000227992

(Requesto	or's Name)
(Address)	
(Address)	
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(City/State	e/Zip/Phone #)
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PICK-UP	WAIT MAIL
(Business	s Entity Name)
(Docume	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer
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**S Warren** NOV 1 6 2018

## **COVER LETTER**

TO: Registration Se Division of Cor		
	NCE, LLC.	
SUBJECT:	Name of Limited Liability Company	
. The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	RAHUL R MEHTA	
•	Name of Person	
	RM FINANCE, LLC.	
	Firm/Company	
	6320 HARDING STREET	
	Address	
	HOLLYWOOD, FL 33024	
	City/State and Zip Code	
	raulmehta 1028@gmail.com	
E C d i C d	E-mail address: (to be used for future annual report notification)	
For further information c	concerning this matter, please call:	
Rahul R. Mehta	954 266-9849 at ( )	
Name o	at (	
Enclosed is a check for the	the following amount:	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	atus &

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

as it now appears on our records.)
as it now appears on our records.) bility Company)
ere filed on $\frac{02/02/2016}{}$ and assigned .
y company here:
Company," the designation "LLC" or the abbreviation "L.L.C."
6320 HARDING STREET
HOLLYWOOD, FL 33024
11/01/2016
ee address on our records, enter the name of the
ee address on our records, enter the name of the
Enter Florida street address

If Changing Registered Agent, Signature of New Heristered Agent

. ķ.,

121 May -

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	GALO S. BASANTES	1299 SE 7 AVENUE	<b>≣</b> Add
		APT. 202	□ Remove
		DANIA BEACH, FL 33004	□ Change
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E. Effect	tive date, if other than the date of filing:	(optional)	
(If an ef <b>Note:</b>	tive date, if other than the date of filing:  Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day  If the date inserted in this block does not meet the applicable statutory filing requirement ment's effective date on the Department of State's records.	ys after filing.) Pursuant to 6	05.020 sted a
(If an ef  Note: docum	five date, if other than the date of filing:  Sective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day.  If the date inserted in this block does not meet the applicable statutory filing requirement.	ys after filing.) Pursuant to 6 ts, this date will not be li	sted a
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(If an ef  Note: docum  If the re (b) The	Fective date, if other than the date of filing:  Sective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day. If the date inserted in this block does not meet the applicable statutory filing requirement nent's effective date on the Department of State's records.  Cord specifies a delayed effective date, but not an effective time, at 12 a 90th day after the record is filed.  November 4  November 4  2016	es after filing.) Pursuant to 60 ts, this date will not be list.  :01 a.m. on the ear	sted a

Filing Fee: \$25.00