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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Registration Se Division of Corp		·	
	IVESTMENTS LLC		·,
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	ANTOINE GENDRE	•	
		Name of Person	
	RH USA INVESTMENTS	LLC	
		Firm/Company	
	805 NORTH ANDREWS	AVE	
		Address	
	FORT LAUDERDALE, FI	L 33311	
		City/State and Zip Code	
	antoinegendre@yahoo.com		
	E-mail address: (to be used for future annual report notific	cation)
For further information c	oncerning this matter, please ca	all:	
ANTOINE GENDRE		954-530-1337 at ()	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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 If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or removed from our records.					
MGR = Manager AMBR = Authorized Member	•	,	ı	,	

<u>Title</u>	<u>Name</u>	Address	Type of Action
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record specifies a The 90th day afte	a delayed effect r the record is	ctive dat filed.	e, but no	ot an effe	ective tir	ne, at 12:	01 a.m.	on tl	ne ear	lier (
MARCH 14TH	1 	,	2016	<u>.</u> .						
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Page 3 of 3

Filing Fee: \$25.00