

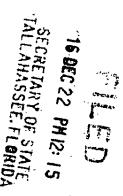
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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	RM RANCI			
		Name of Limi	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are subt	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		RAYMOND MARGEL, SI	R.	
			Name of Person	
			Firm/Company	
		5310 VERANA COURT		
			Address	
		LAKELAND, FLORIDA	33813	
			City/State and Zip Code	
		E-mail address: (1	to be used for future annual report notific	cation)
For fur	ther information co	oncerning this matter, please ca	all;	
RAYMOND MARGEL, SR.		SR.	863 646-8291 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
\$2	5.00 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:

TO:

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

RM RANCH, LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on MARCH 24, 2016 and assigned			
lorida document number L16000059465				
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited liab	pility company here:			
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable: 5310 VERANA COURT				
Principal office address MUST BE A STREET ADDRESS)	LAKELAND, FLORIDA 33813			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)				
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her				
Name of New Registered Agent:	AR R			
New Registered Office Address:	NA KA			
	Enter Florida street address			
	City , Florida ZD 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	n being added
or removed from our records:	

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u></u>	Audi C55	Type of Action
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			Remove
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effective date is listed, the date muster: If the date inserted in this bl	t be specific and cannot	be prior to date of	f filing or more that	n 90 days after	filing.) Pı	irsuant t	o 605.0207 e listed as
cument's effective date on the D				,			
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Typed or printed name of signee

Filing Fee: \$25.00