

L16000072021

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
NOV 07 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RRP CONSULTING LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAJIN M PATEL

Name of Person

RRP CONSULTING LLC

Firm/Company

7707 S ORANGE AVENUE #593991

Address

ORLANDO, FL 32809

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

R. PATEL

407 208 4462

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RRP CONSULTING LLC

(Name of the Limited 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 04/12/2016 and assigned
Florida document number L16000072021.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RRP GROUP CONSULTING LLC

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 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:

RAJIN M PATEL

New Registered Office Address:

7707 S ORANGE AVENUE 593991

Enter Florida street address

ORLANDO

City

Florida

Zip 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

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	RAJIN M PATEL	7707 S ORANGE AVE	<input checked="" type="checkbox"/> Add
		ORLANDO FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PREMNAUTH DWARKA NAUTI	7707 S ORANGE AVE	<input checked="" type="checkbox"/> Add
		ORLANDO FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SUDESH PATEL	7707 S ORANGE AE	<input checked="" type="checkbox"/> Add
		ORLANDO FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE, FLORIDA

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slightly textured appearance and some minor discoloration or smudges near the top edge.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Dated 11/02/2016

P. DWARKANAUTH

Filing Fee: \$25.00