

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RDS-DS LLC

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deb Salyer

Name of Contact Person

Firm/ Company

7315 38th Ct E

Address

Sarasota FL 34243

City/ State and Zip Code

ssu2404@aol.com

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

For further information concerning this matter, please call:

Deb Salyer at (941) 351-2990
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2016

DEB SALYER
7315 38TH CT E
SARASOTA, FL 34243

SUBJECT: RDS-DS LLC
Ref. Number: L16000082082

RECEIVED
2017 JAN -9 AM 11:56
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

We have received your document for RDS-DS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 816A00026268

*The check
was not
returned*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RDS-DS 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:

Rick Salyer
Name of Person

RDS-DS LLC
Firm/Company

7315 38th E
Address

Sarasota FL 34243
City/State and Zip Code

Sun1528@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rick Salyer at (941) 351-2990
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount: pd already

- ☒ \$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

RDS DS 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 4/22/16 and assigned

Florida document number 900284933549

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 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)

Rick Salyer
7315 38th E
Sarasota FL 34243

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:

Deb Salyer

New Registered Office Address:

same


Enter Florida street address

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

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>
AMBR	Rick Salyer	7315 38 CTE	<input checked="" type="checkbox"/> Add
		Sara Sofia 3404B	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Dob Salyer	Same	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 JAN - 6 PM 12:20
 EL PASO COUNTY, TEXAS
 EL PASO, TEXAS

ALLIANCE, FLORIDA

17 JAN -6 PM 12:20
ALL STATE FLORIDA

19, 116

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 4/1/17

Signature of a member or authorized representative

Typed or printed name of signee