

L16000102219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

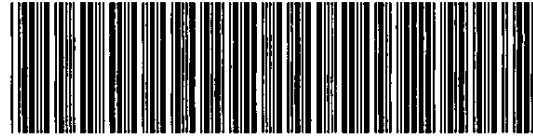
(Business Entity Name)

(Document Number)

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17 JUN -7 PM 4:45
FILED

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JUN 08 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RGAG INVESTMENTS 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:

ROBERTO GAIDARJI
Name of Person

RGAG INVESTMENTS LLC
Firm/Company

3235 TUCKAHOE PL
Address

HOLIDAY, FL 34690
City/State and Zip Code

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

For further information concerning this matter, please call:

ROBERTO GAIDARJI at (727) 312 9180
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$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**

RGAG INVESTMENTS 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 05/25/2016 and assigned
Florida document number L1600102219

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)

819 MARSH REED DR
WINTER GARDEN, FL
34787
819 MARSH REED D
WINTER GARDEN, FL
34787

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 new registered agent and/or the new registered office address here:

Name of New Registered Agent:
New Registered Office Address:

Enter Florida street address

City, Florida

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 f
provisions of all statutes relative to the proper and complete performance of my duties,
accept the obligations of my position as registered agent as provided for in Chapter 6
being filed to merely reflect a change in the registered office address, I hereby confi
company has been notified in writing of this change.

If Changing Registered A
Page 1 of 3

FILED
17 JULY 7 2016
TALLAHASSEE, FL

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

RGAG INVESTMENTS LLC

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(A Florida Limited Liability Company)

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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)

819 MARSH REED DR
WINTER GARDEN, FL
34787

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

819 MARSH REED DR.
WINTER GARDEN, FL
34787

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City

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>
MGR	MADDALENA, MONICA	3235 TUCKAHOE PL	<input type="checkbox"/> Add
		HOLIDAY, FL	<input checked="" type="checkbox"/> Remove
		34690	<input type="checkbox"/> Change
MGR	MOLINA, EDUARDO	819 MARSH REED DR	<input checked="" type="checkbox"/> Add
		WINTER GARDEN, FL	<input type="checkbox"/> Remove
		34787	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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