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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO:	Registration Section . Division of Corporations	
SUBJE	CT: Ride in class, LLC. Name of Limited Liability Company	· -
The en	closed Articles of Amendment and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Roberto Cortes Name of Person	_
	Ridein class, LLC Firm/Company	
	1548 Brickell Ave	
	Miami, FL 33129 City/State and Zip Code	_
	Foberto @rcortes.net E-mail address: (to be used for future annual report notification)	_
For fur	her information concerning this matter, please call:	
Ro	her to Cortes Name of Person at (305) 856 2525 Area Code Daytime Telephone Num	Ext. 111 or 2.18
Enclose	d is a check for the following amount:	
\$25	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	Filing Fee, ficate of Status & fied Copy onal 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

	nclass, LLC		
(Name of the Limited (A	Liability Company as it now appears on Florida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liab		11116	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of the	he limited liability company here:		
The new name must be distinguishable and contain the word		ation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicab			
(Principal office address MUST BE A STREET)	ADDRESS)		
Enter new mailing address, if applicable:		E of Section	Control of the second of the s
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	ن بر	
B. If amending the registered agent and/or		records, enter the	cn O
registered agent and/or the new registered offic	ce address nere:		7
Name of New Registered Agent:			
New Registered Office Address:	 Enter Florida st	reet address	
		, Florida	
•	City	, FIULIUA	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 Men	aber

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Roberto Cortes	1548 Brickell Ave	Add
		1548 Brickell Ave Miami, FL 33129.	Remove
			Change
			□ Remove
			Change
			□ Remove
			Change
			Add
			☐ Remove
		Manage As a second seco	Change
			Add
			□ Remove
			☐ Change
		·n.P	3 □ Add
		RY OF STATE SEE, FLORIDA	रा □ Romeve
		RIDA	Change

Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing: (optional) 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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records. The 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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records. The 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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records. The 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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed. Dated 18		· · · · · · · · · · · · · · · · · · ·
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Filing Fee: \$25.00