## 116000156317

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(Re	questor's Name)		
(Ad	(Address)		
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(Cil	ty/State/Zip/Phone	e #)	
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(Bu	isiness Entity Nar	ne)	
(Do	ocument Number)		
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DEC 0 6 2016 S. YOUNG



## **COVER LETTER**

SUBJECT: RBS INNOVATOR	e Visions	_
Nam	e of Limited Liability Company	
The enclosed Articles of Amendment and fee(s)	are submitted for filing.	
Please return all correspondence concerning thi	s matter to the following:	
Rosanna VanEpps		
	Name of Person	
	Firm/Company	
6021 41st Ave N		20
	Address	16. C.
Saint Petersburg,	FL 33709	
rosannabve@gmai	City/State and Zip Code	<b>3</b>
<u> </u>	address: (to be used for future annual report notification)	PEC-2 PH 4: 48
For further information concerning this matter,	please call:	<b>5</b>
Rosanna VanEpps	727 512-9605 at ()	
Name of Person	Area Code Daytime Telephone Nu	mber
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fe Certificate of \$	tatus Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	O Filing Fee, ificate of Status & ified Copy tional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tailahassee, 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

RB's Innovative Visions LLC		
(Name of the Limi	ted Linbility Company as it now appears on our records.) (A Florida Limited Liability Company)	
he Articles of Organization for this Limited L	iability Company were filed on August 22, 2016	and assigned
orida document number L16000156317	·	
his amendment is submitted to amend the fol	lowing:	
. If amending name, enter the new name o	of the limited liability company here:	
to new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
rincipal office address MUST BE A STRE	ET ADDRESS)	<del>- 50</del>
		<u> </u>
		BE AND THE
nter new mailing address, if applicable:		1 00 TO
Mailing address MAY BE A POST OFFICE	BOX	न लंदा
		- 54
		<b>58</b>
<ol> <li>If amending the registered agent and egistered agent and/or the new registered of</li> </ol>	or registered office address on our records, ente	er the name of the ne
Name of New Registered Agent:	Rosanna Bermudez	
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 Chapting Registered Agent, Signature of New Registered Agent

ir 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>	Name	Address	Type of Action
AMBR Rosanna VanEpps	Rosanna VanEpps	6021 41st Ave N	
		Saint Petersburg, Florida 33709	■ Remove
			Change
AMBR	Rosanna Bermudez	6021 41st Avc N	Add
		Saint Petersburg, Florida 33709	□ Removc
			Change
			Add
			Bemove
			PH Change
			□ Remove
			Change
			Add
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change

ir amending any other information, enter change(s)	here: (Attach additional sheets. if necessary.)
	1 200
	DEC PROPERTY.
	<b>1</b>
	# # B
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be Note: If the date inserted in this block does not meet the ap document's effective date on the Department of State's reco	(optional) prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 pplicable statutory filing requirements, this date will not be listed as ords.
the record specifies a delayed effective date, but The 90th day after the record is filed.	t not an effective time, at 12:01 a.m. on the earlier of
Dated	
Frommer Dem	
	authorized representative of a member
Rosanna Bermudez	$\circ$
	printed name of signec

Page 3 of 3

Filing Fee: \$25.00