

LI6000 191016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

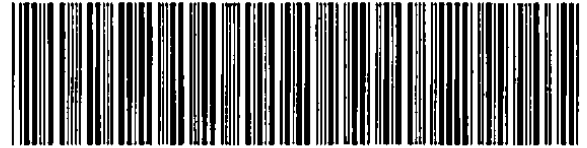
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 AUG 27 AM 11:32

FILED

GOLDEN

SEP - 7 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RM CATERING SERVICES 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:

VERONICA TORIO ROSARIO
Name of Person

Firm/Company

615 N ANDREWS AVENUE #207
Address

FORT LAUDERDALE, FL 33311
City/State and Zip Code

MR.TORIO@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VERONICA TORIO ROSARIO at 954, 991-8685
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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

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

RM CATERING SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2019 AUG 27 AM

The Articles of Organization for this Limited Liability Company were filed on 10/17/2016 and assigned Florida document number L16000191016.

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)

23 EDMUND Rd

WEST PARK, FL 33023

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

23 EDMUND Rd

WEST PARK, FL 33023

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:

VERUGETORIO ROSARIO RAMIREZ

New Registered Office Address:

23 EDMUND Rd

Enter Florida street address

WEST PARK

City

Florida

33023

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.

Verugetorio Rosario Ramirez
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	VERGUETORIO ROSARIO NEJIA	615 N ANDREWS AVE	<input type="checkbox"/> Add
		APT. 207	<input checked="" type="checkbox"/> Remove
		FORT LAUDERDALE, FL 33311	<input type="checkbox"/> Change
AMBR	VERGUETORIO ROSARIO RAMIREZ	23 EDWARD RD	<input type="checkbox"/> Add
		WEST PARK, FL 33023	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

10/15/2016

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

Typed or printed name of signer