116000230974

Office Use Only



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SECRETARY. OF STATE CALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Se Division of Cor	
Rod Enterp	prises LLC
SUBJECT:	Name of Limited Liability Company
	Amendment and fee(s) are submitted for filing.
riease return an correspo	ondence concerning this matter to the following.
	Rodrigo Tadeu Ferraz do Amaral
	Name of Person
	Rod Enterprises LLC
	Firm/Company
	3331 Murrow st
	Address
	New Port richey FL 34655
	City/State and Zip Code
	Rodenterpriseslle@gmail.com E-mail address: (to be used for future annual report notification)
For further information of	concerning this matter, please call:
Renata C Langame	727 678-2789 at ()
Name o	of Person Area Code Daytime Telephone Number
Enclosed is a check for t	the following amount:
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

Rod Enterprises LLC			
(Name of the Limit	ed Liability Company (A Florida Limited Lia	as it now appears on our I bility Company)	ecords.)
The Articles of Organization for this Limited L. Florida document number L16000230974	iability Company w	ere filed on 12/22/2016	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liabili	ty company here:	
The new name must be distinguishable and contain the w	ords "Limited Liability	Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	7 i.e.
(Principal office address MUST BE A STREE	T ADDRESS)		
	-		6 %
his amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company is the new name must be distinguishable and contain the words "Limited Liability Company," the inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address here: Name of New Registered Agent: New Registered Office Address: Renata Cristian Langame 3331 Murrow St Enter File New Port Richey City ew Registered Agent: hereby accept the appointment as registered agent and agree to act in this rovisions of all statutes relative to the proper and complete performance of the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and complete performance of the statutes relative to the proper and the statutes relative to the proper and the statutes relative to the proper and the s			7. CGB
(Mailing address MAY BE A POST OFFICE	<i>BOX)</i>		
		ce address on our re	cords, <u>enter the name of the new</u>
Name of New Registered Agent:	Renata Cristian La	angame	
New Registered Office Address:	3331 Murrow St		
		Enter Florida street	
	New Port Richey		_, Florida 34655 Zip Code
		City	Zip Code
• • •	er and complete po stered agent as pro registered office ac	erformance of my duti ovided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is

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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 **Type of Action** <u>Address</u> **Title** Name Renata Cristian Langame 3331 Murrow ST MGR **■** Add New Port Richey FL 34655 _□ Remove ☐ Change □ Add □ Remove _□ Change _□ Add _□ Remove _□ Change □ Add _□ Remove _□ Change _□ Add _□ Remove _□ Change □ Add

□ Remove

□ Change

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ffec	tive date, if other than the date of filing: (optional)		
an ei	Tective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	ı 605,02 ∶listed	207 (3) as the
	nent's effective date on the Department of State's records.	nstea	45 111
s re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	arlier	٥f٠
	e 90th day after the record is filed.	ai iici	Οι,
	October 27 2017		
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Typed or printed name of signee

Filing Fee: \$25.00