L170000 77198

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



400322508014

01/18/19--01016--082 ++25.84

PILED
2019 JAN 18 PH 1: 34
2550551/254 Distribu

JE 24/19

COVER LETTER

TO:	Registration Sec Division of Corp						
CUDI		ł R&K, LLC					
Name of Limited Liability Company							
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspon	ndence concerning this matter	to the following:				
		Damian Escarze Arocha					
			Name of Person				
		DODAVAH R&K, LLC					
		***************************************	Firm/Company				
		3950 W 12th Ave					
			Address				
Hialeah, Fl 33012							
City/State and Zip Code							
damian112382@gmail.com							
		E-mail address: (to be used for future annual report notifi	ication)			
For fur	ther information co	oncerning this matter, please c	all:				
Damian Escarze Arocha			786 953-0308				
	Name of	f Person	Area Code Daytime	Telephone Number			
Enclos	sed is a check for th	e following amount:					
■ \$2	5.00 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**

Dodavah R&K, LLC			
(Name of the Limited I	iability Company as it now appears of forida Limited Liability Company)	n our records.)	-
	lity Company were filed on 04/05	2/2017 and	assigned
ument number L17000077198	·		
lment is submitted to amend the followi	ng;		
nding name, <u>enter the new name of th</u>	e limited liability company here	:	
e must be distinguishable and contain the words	s "Limited Liability Company," the design	gnation "LLC" or the abbreviation	"L.L.C."
principal offices address, if applicable	e:		
office address MUST BE A STREET A	ADDRESS)	ALL ALL	T TAKE
mailing address, if applicable:		ASSEC	IN PE
	<u></u>	FLORE	H : 31
		our records, enter the nan	ie of the new
ame of New Registered Agent:			
ew Registered Office Address:	Enter Florida	ı street address	
		, Florida	
	(Name of the Limited Link) is of Organization for this Limited Liabi ument number L17000077198 Iment is submitted to amend the following name, enter the new name of the must be distinguishable and contain the words principal offices address, if applicable office address MUST BE A STREET A mailing address, if applicable: Indicate the registered agent and/or agent and/or the new registered office address of New Registered Agent:	(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company) s of Organization for this Limited Liability Company were filed on 04/05 ument number L17000077198 Iment is submitted to amend the following: Inding name, enter the new name of the limited liability company here It is emust be distinguishable and contain the words "Limited Liability Company." the designation of the limited Liability Company. The designation of the limited Liability Company. The designation of the limited Liability Company here Indicated the second of the limited Liability Company here It is address MUST BE A STREET ADDRESS) In mailing address, if applicable: Indicated the registered agent and/or registered office address on organization of the new registered office address here: In the liability Company were filed on 04/05 In the limited Liability Company were filed on 04/05	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) s of Organization for this Limited Liability Company were filed on 04/05/2017 and a ument number L17000077198 Iment is submitted to amend the following: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited Liability Company." the designation "LLC" or the abbreviation principal offices address, if applicable: Indirect address MUST BE A STREET ADDRESS) Imailing address, if applicable: Indirect address MAY BE A POST OFFICE BOX) Indirect address on our records, enter the name agent and/or the new registered office address here: Indirect address on our records, enter the name agent and/or the new registered office address here:

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>	Address	Type of Action
		•	Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			□ Change
			Add
			Remove
			CECKE JAN DE CHANGE DE CHA
			☐ Remove
			Add
			П Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00