## 117000090378

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22 MAY -6 AM 9: 14

T. MATTHEWS
JUN 28 2022

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

## **COVER LETTER**

	Name of Lin	nited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Johanna Castellon-Vega	<u>.</u> .	
		Name of Person	
	Almazan Law, P.A.		
		Firm/Company	<del></del>
	7901 Ludlam Road, Suite	100	
		Address	
	Miami, FL 33143		
		City/State and Zip Code	
	jvega@almazanlaw.com		
For further information of	E-mail address: ( concerning this matter, please c	to be used for future annual report not	tification)
	-		
Johanna Castellon-Vega		305 665-6681 at ()	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 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 enclos
Mailing Addres		Street Address:	
Registration S Division of C		Registration So Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



22 MAY -6 AM 9: 14

R&L Investments VII, LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	<u>appears on our records.</u> ) pany)
The Articles of Organization for this Limited Liability Company were filed Florida document number $\frac{L17000090378}{L17000090378}$ .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	any 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on agent and/or the new registered office address here:	our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address:	
En	er Florida street address
	, Florida Zip Code
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 provisions of all statutes relative to the proper and complete performan accept the obligations of my position as registered agent as provided for	ce of my duties, and I am familiar with and

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

Title	<u>Name</u>	Address	Type of Action
AMBM	Cesar G. Martinez	6350 and 6400 South Kanner Highway	🗆 Add
		Stuart, FL 34997	Remove
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			Remove
			Change
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	5/4/2022		
	date of filing:	o data of filing or more than 00 days	optional)
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Filing Fee: \$25.00