117000095928

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COVER LETTER

Div	ision of Corp	orations			
SUBJECT:	RAIVIC DE	VELOPMENT LLC			
oobuner.		Name of Limit	ted Liability Company		
The enclosed	d Articles of A	mendment and fee(s) are subn	nitted for filing.		
Please return	all correspon	dence concerning this matter t	o the following:		
		JHON RODRIGUEZ			
Name of Person					_
		JIREH MULTISERVICES	LLC		
			Firm/Company	-	_
3095 S MILITARY TRAIL STE 4					
			Address		_
		LAKE WORTH FL 33463			
City/State and Zip Code				 -	-
		jirehmulti@gmail.com			
		E-mail address: (to	be used for future annual rep	ort notification)	
For further in	nformation co	ncerning this matter, please ca	11:		
JHO RODR	IGUEZ		561 574 9		
Name of Person at () Name of Person Area Code Daytime Telephon			Daytime Telephone Numb	פר	
Enclosed is a	a check for the	following amount:			
≘ \$25,00 F		□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certifie	ate of Status &

MAILING ADDRESS:

TO:

Registration Section

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

RAIVIC DEVELOPMENT LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/01/2017 Florida document number 117000095928 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 "LLC." 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 our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 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
AMBR	Rainel Alexander Rosario Almonte	335 RIVER BLUFF LN	⊟ Add
		ROYAL PALM BEACH	Remove
		FL 33411	
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n ellec te: If cumer	(optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing the date inserted in this block does not meet the applicable statutory filing requirements, this date it's effective date on the Department of State's records.	.) Pursuant will not b	be listed	i as
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. Oth day after the record is filed.	on the (earlier	of
ed _	8-15 2017			
	Sonon Min			
	Signature of a member of authorized representative of a member Sandy Nunez Typed or printed name of signee			