# L17000118452

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer.				

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DIVISION OF COMPONATION.

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 16, 2017

BLANCA RIOS 7501 SW 84TH CT MIAMI. FL 33143

SUBJECT: R & R PAPER DISTRIBUTORS LLC

Ref. Number: L17000118452

We have received your document for R & R PAPER DISTRIBUTORS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 017A00012267

#### **COVER LETTER**

SUBJECT: R & R	Page Di	whitetors,	LLC	
<del></del>	7 Name of Limi	ted Liability Company		···
The enclosed Articles of Amendme	ent and fee(s) are sub-	nitted for filing.		
Please return all correspondence co	ncerning this matter t	o the following:		
	Ble	unca Ri	か	
		Name of Person		
-	RARF	Person Company	subutor	11C
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	75015	W84th	Court	<del></del>
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<del></del>	M. lan	City/State and Zip Code  25001 C G  be used for future annual	33/4	<u>?</u>
'n	JANGARI	OSOOL 62 C	2010	13574
	E-mail address: (to	be used for future annual	report notification)	
For further information concerning	this matter, please cal	II:		
Blanca R	ル(ご	at ( $3\hat{v}\hat{s}$ )	929-94	61
Name of Person		Area Code	Daytime Telephon	e Number
Enclosed is a check for the followin	g amount:			
\$25.00 Filing Fee \$25.00 Cer	90 Firing Fee & stiffcate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) (	60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

The Articles of Organization for this Limited Liability Company were filed on  $\_5 - 36 - 17$ Florida document number <u>L 17000 118452</u> 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 "I imited I labelity Company," the designation "ELC" 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 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 City

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> Address Name Type of Action BLANCARIUS 75015W87thCourt ☐ Remove Change □ Add □ Remove \_□ Remove □ Change □ Add ☐ Remove ☐ Change □ Remove ☐ Change □ Add

☐ Remove

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Note: If	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date int's effective date on the Department of State's records.	) Pursuant to 605.0207 (3)(b)
	and specifies a delayed effective date, but not an effective time, at 12:01 a.m., 90th day after the record is filed.	on the earlier of:
Dated _	6-1- 2017.  Blanca Rice.  Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member  BLANCA Typed or printed name of signee	·
	BLANCA KIND	

Page 3 of 3

Filing Fee: \$25.00