## 117000131128

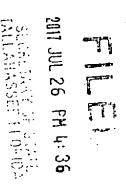
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JUL 28 2017 J. HARRIS

## COVER LETTER

TO:	Registration S Division of Co		·		
erib i	rer.	RICKMINERS LLC			
SUBJ	ECI:	Name of Lim	ited Liability Company		
The er	nclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Płease	return all corresp	ondence concerning this matter	to the following:		
		BENIG	no r. granda		
			Name of Person		
			Firm/Company		<del></del>
			290 NW 43RD C MEZZANINE		
			Address MIAMI, FLORID	OA 33169	
			City/State and Zip Co		
			Benny8010@gmail.co	em.	
For fu	rther information	E-mail address: ( concerning this matter, please co	to be used for future ann	ual report notifi	cation)
	BENIGNO R. G	-		222 40	
		of Person	at ( <u>305</u> ) Area Code	Daytime	Telephone Number
Enclos	sed is a check for	the following amount:			
<b>53</b> \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing F Certified Copy (additional copy is	•	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		LING ADDRESS: tration Section	h	EET/COURIE tration Section	ER ADDRESS:
	Divisi	ion of Corporations	Divisi	ion of Corpora	
		Box 6327 nassee, FL 32314		n Building Executive Cen	uter Circle
	ा दाविष	105500, 1 L 54514		hassee. FL 323	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

٠.

	RICKMINNERS LLC		
(Name of the Limited	I Liability Company as it n A Florida Limited Liability C	ow appears on our record company)	<u>(is.)</u>
The Articles of Organization for this Limited Lia	bility Company were fil	ed on06-15-2017	and assigned
Florida document number			<u> </u>
This amendment is submitted to amend the follow	ving:		
a. If amending name, enter the new name of t	the limited liability cor	npany here:	
	N/A		
he new name must be distinguishable and contain the wor	rds "Limited Liability Comp	any," the designation "LL0	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:		- Ka
Principal office address MUST BE A STREET	ADDRESS)	<del></del>	20 =
			20 7
Enter new mailing address, if applicable:			
•	-		1.17 - Alle
<u>Mailing address MAY BE A POST OFFICE B</u>	<u> </u>		
			<u> </u>
B. If amending the registered agent and/o		dress on our record	s, enter the name of the n
egistered agent and/or the new registered offi  Name of New Registered Agent:	ce address here: RICARDO ALBARRAC	IN	
Name of New Registered Agent:			
	RICARDO ALBARRAC		555
Name of New Registered Agent:	RICARDO ALBARRAC	RT Enter Florida street addre	2220
Name of New Registered Agent:	RICARDO ALBARRAC 10936 NW 43RD COU	RT  Enter Florida street addre F	
<del></del>	RICARDO ALBARRAC 10936 NW 43RD COU SUNRISE	RT  Enter Florida street addre F	lorida 33351

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	Manager Authorized Member		
<u>tle</u>	<u>Name</u>	Address	Type of Action
MGR	RICARDO ALBARRACIN	10936 NW 43RD COURT	∆ Add
			☐ Remove
IGR	RICARDO ALARRACIN		
		10936 NW 43RD COURT	☑ Remove
			Change
MGR	VANESSA GUADARRAMA	10936 NW 43RD COURT	<b>[3</b> ] Add
			Remove
			Change
1GR	VANESSE GUADARRAMA		Add
		10936 NW 43RD COURT	⊠ Remove
			□ Change
			□ Add
			Don Remove
			□ Remove

D. If amending any other information, enter change(s) here: (Attac	ch additional sheets, if necessary.)
<del>"</del>	
E. Effective date, if other than the date of filing:  [If an effective date is listed, the date must be specific and cannot be prior to date of	(optional)  Sling or more than 90 days after filing.) Pursuant to 605.0207 (3)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	
If the record specifies a delayed effective date, but not an eff (b) The 90th day after the record is filed.	 rective time, at 12:01 a.m. on the earlier of:
Dated JULY 20 . 2017	14/20/2017 AM & TI
Signature of a member or authorized repr	rescritative of a member
Typed or printed name of	f signee
	#: 36
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Filing Fee: \$25.00