## L17000133429

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S. WARREN

JUN 2 7 2017

## **COVER LETTER**

	Registration Sec Division of Corp			
CUB IF		JLTING, LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	_	
r rouse re	turi un correspon	RAFAELA CUBEZIN	io die folio walig.	
		-	Name of Person	
		RTM INTERNATIONAL,	LLC	
			Firm/Company	
		14 E WASHINGTON ST	2ND FLOOR	
			Address	
		ORLANDO, FL 32801		
			City/State and Zip Code	<del>*</del>
		translationsrtm@gmail.com		
For furth	er information co	e-mail address: (	to be used for future annual report notifi all:	cation)
RAFAEI	LA CUBEZIN		407 968-9640	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	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

SRI CONSULTING, LLC.

SKI CONSULTING, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on or Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{06/19/20}{1}$	and assigned
Florida document number L17000133429	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designat	ion "LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
<del></del>		-
B. If amending the registered agent and/or registered agent and/or the new registered office address of New Registered Agent:		records, enter the name of the ne
New Registered Office Address:		
	Enter Florida stre	et address
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence accept the obligations of my position as registered ago being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of my di gent as provided for in Chapte	ities, and I am familiar with and er 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
AMBR	JAMIR CARLOS BEZERRA	14 E WASHINGTON ST	■ Add
		ORLANDO, FL 32801	Remove
			□ Change
AMBR	RODRIGO IANNIBELLI	14 E WASHINGTON ST	D Add
		ORLANDO, FL 32801	■ Remove
			☐ Change
			Add
		<u></u>	Remove
			□ Change
<del></del>			
			Remove
			Change
			☐ Remove
			Change 22 Change
			TTC DOAdd
			SIA DRemove
			☐ Change

		(optional)
tive date. if other than the d	ate of filing:	<del></del> \
ffective date is listed, the date must b	te specific and cannot be prior to date of filing or more	than 90 days after filing.) Pursuant to 605 quirements, this date will not be liste
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