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(Requestor's Name)
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,
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COVER LETTER

	Registration Se Division of Cor			
SUBJEC	RGR Brit U			
30DJEC	.1.		ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Giovana Melim		
			Name of Person	<u> </u>
		RGR Brit USA LLC		
			Firm/Company	
		8643 Brixford Street		
			Address	
		Orlando, FL, 32836		
			City/State and Zip Code	
		melimvix@gmail.com		
		E-mail address: (t	to be used for future annual report notific	cation)
For furth	er information o	oncerning this matter, please ca	all:	
Rodrigo	Melim		407 9236078 at ()	
	Name o	f Person	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

RGR Brit USA 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 $\frac{08/03/2017}{1}$ and assigned Florida document number L17000165585 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 Florida 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 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, \underline{enter} the title, name, and address of each person being added \underline{or} removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Rodrigo Melim	8643 Brixford Street,	■ Add
		Ortando, FL, 32836	Remove
			
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If an effective	date, if other than the date of filing: (option we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fi	nal) iting.) Pursuant	(b) 605.02
<u>Note:</u> If t document	the date inserted in this block does not meet the applicable statutory filing requirements, this of seffective date on the Department of State's records.	date will not l	be listed as
	d specifies a delayed effective date, but not an effective time, at 12:01 a. th day after the record is filed.	m. on the	earlier o
The 90			
	08/24/ , 2017 .		
	08/24/ . 2017 . Notation of a member of authorized representative of a member		_

Page 3 of 3

Filing Fee: \$25.00