## L17 000 198364

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J. HARRIS

## **COVER LETTER**

SUBJ	ECT: R	GW IP Holder, LLC			
5520		Name of Limi	ited Liability Company		
The er	nclosed Articles of	Amendment and fee(s) are subr	mitted for filing.		
Please	return all correspo	ndence concerning this matter t	to the following:		
		Tamieka Range			
Name of Person					
		7501 Citrus Ave, #1191			
			Address	<del></del> -	
		Goldenrod, FL	32733		
		<del></del>	City/State and Zip Code		
		T.Range@Rangelawfirm.		<del></del>	
		E-mail address: (t	o be used for future annual report notific	ation)	
For fu	rther information c	oncerning this matter, please ca	ill:		
Tami	eka Range		407 502-7626 at ()		
	Name o	f Person		l'elephone Number	
Enclos	sed is a check for th	ne following amount:			
<b>■ \$</b> 2	25.00 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

TO:

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

2017 and	– assigned
2017 and	assigned
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LLC" or the abbreviation	"L.L.C."
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	2018 JUS - 9

## 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
MGR	DARNELL GARDENER	3481 BRIAR BAY BLVD, 103	
		WEST PALM BEACH, FL 33411	□ Remove
			Change
			Add
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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 filing or more the Note: If the date inserted in this block does not meet the applicable statutory filing requousment's effective date on the Department of State's records.	ian 90 days after filing.) Pursuant to 6	605.0207 (3 isted as th
the record specifies a delayed effective date, but not an effective time  The 90th day after the record is filed.	, at 12:01 a.m. on the ear	rlier of:
Dated	2018 (A)	
OccuSigned by:		
Tamicka Range Signature of a member or authorized representative of a	··· · · · · · · · · · · · · · · · · ·	Territori
AF86AEDA5950482 Signature of a thember of authorized representative of a	(2)	in can
Tamieka Range		
Typed or printed name of signee	2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	<sup>2</sup>

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Filing Fee: \$25.00