

7/Jul. 20. 2018 5:43PM

Division of Corporations

No. 2719

P. 1

L170002457411

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : US TAX CONSULTING INC
Account Number : I20160000060
Phone : (407)674-8969
Fax Number : (407)674-8970

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RM CAR LLC

Certificate of Status	1
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Estimated Charge	\$30.00

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Corporate Filing Menu

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JUL 24 2018

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
RM CAR LLC**

The Articles of Organization for this Florida Limited Liability Company were filed on 11/30/2017 and assigned Florida document number .

Florida document number: L17000245741.
EIN Number: 36-4884297

Article I

A. If amending name, enter the new name of the limited liability company here:

4 R&M SERVICE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Article II

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

10091 MEMOIR AVE. WINTER GARDEN, FL 34787

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10091 MEMOIR AVE. WINTER GARDEN, FL 34787

Article IV

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: *US TAX CONSULTING INC*

New Registered Office Address: *5401 S KIRKMAN RD STE 135, ORLANDO, FL 32819*

New Registered Agent's Signature, if changing Registered Agent:



Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

2018 JUL 23 PM 12:54
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF ORANGE, FLORIDA

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

Title	Name	Address	Type of Action
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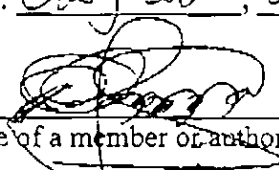
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please change the members address for the same address the principal business
10091 MEMOIR AVE, WINTER GARDEN, FL 34787

E. Effective date, if other than the date of filing: (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

DATED: July 20th, 2018



Signature of a member or authorized representative of a member

RODRIGO CAVALCANTE
Typed or printed name of signee

2018 JUL 23 PM 12:54
CLERK OF COURT
CLERK OF COURT