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(Requestor's Name)

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(City/State/Zip/Phone #)

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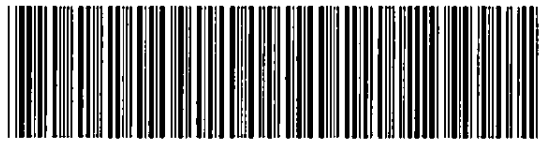
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TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RMK Investments Sanford LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Miguel Cegarra
Name of Person

RMK Investments Sanford LLC
Firm/Company

11954 Narcoossee Rd Ste 2 Box 155, Orlando, FL 32832
Address

Orlando, FL 32832
City/State and Zip Code

Miguel.a.Cegarra@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Miguel Cegarra at (917) 306-3148
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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RMK investments Sanford LLC
(Name of the Limited Liability Company as it now
(A Florida Limited Liability Com

If Changing Registered Agent, Signature of New Registered Agent

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated February 12, 2024

Signature of a member or authorized representative of a member

Miguel Cegarra
Typed or printed name of signee