118000006065

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



400307601404

01/17/18--01004--033 **60.00

RECEIVED

JAH 1 6 2018

18 JAN 16 PH 11: 21

COVER LETTER

TO:	Registration Se Division of Cor			
erm 11		nunication & Management Gro	up. L.I.C	
SUBJI	·CI:	Name of Lim	ited Liability Company	
***			50 1 S - 60	
The en	closed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Oralena Brazier		
			Name of Person	
		Rose Communication & M	anagement Group, LLC	
			Firm/Company	
		3504 Bayaro Way		
			Address	
		Clermont, FL 34711		
		theoralenarose@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual	eport notification)
For fur	ther information co	oncerning this matter, please co	ill:	
Oralen	a Brazier		602 56	5053
	Name o	f Person	Area Code	Daytime Telephone Number
Enclos	ed is a check for th	ne following amount:		
□ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is end	Certificate of Status &
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 issee, FL 32314	Registrat Division Clifton F 2661 Exc	T/COURIER ADDRESS: ion Section of Corporations suitding contive Center Circle see, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rose Communication & Management Gro	up. LLC			
(Name of the Limited Liab	oility Company as it no ida Limited Liability Co	w appears on our records.) mpany)		
The Articles of Organization for this Limited Liability		January 8, 2018	and assigned	
Florida document number 1.18000006065		7 0	and anyighted	
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the li</u>	mited liability com	any here:		
The new name must be distinguishable and contain the words "L	imited Liability Compar	;" the designation "LLC" or the ab	obreviation "L.L.C."	-
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADI	DRESS)		80 (Ω □
			AH.	Ž
			ASSA	≅- ≈,=
Enter new mailing address, if applicable:			- 10 (11)	ڪزر ⊇د
(Mailing address MAY BE A POST OFFICE BOX)			TE E	S,
			28	TATE.
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac		ress on our records, <u>enter</u>	the name of the	<u>nev</u>
New Registered Office Address:				SECRETARY OF STATE of the
	E	int er Florida street address		
		, Florida		_
	City		Zip Code	
New Registered Agent's Signature, if changing Registe				
I hereby accept the appointment as registered agenorovisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	l complete perform agent as provided red office address.	ince of my duties, and I am j for in Chapter 605, F.S. Or,	familiar with and if this document is	
	If Changing Regis	tered Agent, <u>Signature of New Ro</u>	vistered Agent	

Page 1 of 3

T ,

If amending or removed	g Authorized Person(s) authorized to m from our records:	nanage, <u>enter the title, name, and add</u>	lress of each person being added
MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Daryl I, Brazier	3504 Bavaro Way	Add
		Clermont, FL 34711 US	■ Remove
			☐ Change
			Remove
			Change
			
			□ Remove
			□ Change
			□ Remove
			☐ Change
			Remove
			Change
			Remove
			☐ Change

. If amending any other inform	ation, enter change(s) here	: (Attach additional	sheets, if necessary.)	
·				
_				_
				_
]		
				
			<u> </u>	
 			· · · · · · · · · · · · · · · · · · ·	d 6
				PH =
		Ì		JAN 16 PHILE 22
) (4)
Effective date, if other than the (If an effective date is listed, the date m	e date of filing:ust be specific and cannot be prior t	o date of filinglor more th	(optional) ian 90 days after filing.) Pursi	uant to 605.0207
Note: If the date inserted in this document's effective date on the	block does not meet the applica	ble statutory filing req	uirements, this date will n	not be listed as
document serietive date on the	ocpariment of State 8 records.			
the record specifies a delaye	ed effective date, but not	an effective time	, at 12:01 a.m. on th	ne earlier of
) The 90th day after the re	cord is filed.	}		
January 10	2018			
Dated	<u> </u>	-·		
	ralena R.	Drazie	r	
	Signature of a member or author	rized representative of a	member	
Oralena Brazier		1		
	Typed or printer	d name of cionos		

Page 3 of 3

Filing Fee: \$25.00