118000039252

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	Registration Se Division of Cor		, ,	P
	RC FAMIL	Y LLC		
SUBJEC				
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:	
		JOSE LUIS RAMOS		
			Name of Person	
		RC FAMILY LLC		
			Firm/Company	
		3910 S. ROOSELVET BL	VD APT 109E	
			Address	
		KEY WEST, FL 33040		
		.	City/State and Zip Code	
		FPARRADURAN@HOTM	[AIL.COM] to be used for future annual report noti:	fication) ~~~
For furth	ier information c	oncerning this matter, please co		e Telephone Number
JOSE LU	UIS RAMOS		305 330-0311 at ()	21
	Name o	f Person		e Telephone Number :
Enclosed	l is a check for th	ne following amount:		
■ \$2 5.	.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		Street Address: Registration Sec	ction .

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RC FAMILY LLC	The Control of the Co	
(Name of the Limited Liab (A Flor	ility Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 09/02/2020	and assigned
Florida document number L8000039252		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "I.	imited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADd	DRESS)	
		<u> 202</u>
		A Se
Enter new mailing address, if applicable:	-11	
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
B. If amending the registered agent and/or registe agent and/or the new registered office address here		name of the new registers
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	.i
	City	Zip Code

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

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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	JOSE LUIS RAMOS	3910 S ROOSEVELT BLVD APT 109E	
		KEY WSET FL 33040	□Remove
			Change
MGR	DIANA J CABRERA	3910 S ROOSEVELT BLVD APT 109E	
		KEY WEST FL 33040	□Remove
			■ Change
			□Add
			□Remove
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			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

Typed or printed name of signee