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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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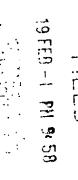




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COVER LETTER

Division of Cor			
	ISERVICES LLC.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
·	DANIEL FUENTES	•	
	ROSIBEL FUENTES	Name of Person	
	541 NEW YORK DR LOT	Firm/Company	
	FORT MYERS F1, 33905	Address	
	rf.multiserviceslle@gmail.c	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
DANIEL FUENTES		239 672-1672	
Name (of Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for t	he 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 Fec. Certificate of Status & Certified Copy (additional copy is enclosed)
Regist	JNG ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpor	n

P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

R F MULTISERVICES LLC

(Name of the Limited Liabili	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability Colorida document number	Company were filed on $04/18/2018$ $4/4/2018$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the lim</u>	nited liability company here:
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDI	RESS)
	<u> </u>
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	4:
	3 → 3
 If amending the registered agent and/or registered agent and/or the new registered office add 	stered office address on our records, enter the name of the tress here:
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address:	Enter Florida street address
New Registered Office Address:	Enter Florida street address , Florida City Zip Code

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. Thereby 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	DANIEL FUENTES	541 NEW YORK DR LOT 81 FORT MYERS FL 33905	Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Remove
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			☐ Change
			□ Remove
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ffective date, if other than the date in effective date is listed, the date must be shote: If the date inserted in this block cocument's effective date on the Depart	loes not meet the app	licable statutory filing	(optional) ore than 90 days after filing.) requirements, this date v	Pursuant to 605,0207 will not be listed as
e record specifies a delayed eff The 90th day after the record		not an effective t	me, at 12:01 a.m. c	on the earlier o
JANUARY 30 TH ated	2019			
	P/1-			
	Thoyap	alhorized representative		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00