

9/22/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000329649 3)))



H200003296493ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

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
RBME LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2020 SEP 22 AM 10:39

2020 SEP 22 AM 10:04
FILED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

SEP 22 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RBME LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/16/2018 and assigned
Florida document number 118000123534.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8580 SW 124 STREET

MIAMI, FL 33156

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8580 SW 124 STREET

MIAMI, FL 33156

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

CHANGE OF ADDRESS

New Registered Office Address:

8580 SW 124 STREET

Enter Florida street address

MIAMI

City

Florida 33156

Zip Code

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

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

FILED
 2020 SEP 22 AM 10:04
 CLERK OF COURT
 1000 STATE STREET
 MIAMI, FL 33133

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	BROOKS ROY SANCHEZ	8580 SW 124 STREET	<input type="checkbox"/> Add
		MIAMI, FL 33156	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	CHANGE OF ADDRESS	8580 SW 124 STREET	<input type="checkbox"/> Add
		MIAMI, FL 33156	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	CHANGE OF ADDRESS	8580 SW 124 STREET	<input type="checkbox"/> Add
		MIAMI, FL 33156	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	CHANGE OF ADDRESS	8580 SW 124 STREET	<input type="checkbox"/> Add
		MIAMI, FL 33156	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2020 SEP 22 AM 10:04
STATE
FL

FILED

RECEIVED
JAN 10 1964
U.S. AIR FORCE

2020 SEP 22 AM 10:04

ד
ל
מ
ו

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 17, 2000

Signature of a member or authorized representative of a member

BROOKS ROY SANCHEZ

Typed or printed name of signer

Filing Fee: \$25.00