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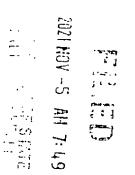
| (R | equestor's Name) | |
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| Certified Copies | Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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A. BUTLER NOV 2 9 2021

COVER LETTER

| TO: Registration Se Division of Cor | morations | | |
|--|--|--|---|
| SUBJECT: | Rogue and Name of Limit | Brothers ed Liability Company | <u>LLC</u> |
| The enclosed Articles of | Amendment and fee(s) are subn | nitted for filing. | |
| Please return all correspo | ondence concerning this matter to | o the following: | |
| | - Ire | ne Percz Name of Person | <u>-</u> |
| | Rogue | Firm/Company | rs LLC |
| | 2305 M | Ainton Rd. Address | #120932 |
| | Melbour. 1:/ysherbsa | PEFL City/State and Zip Code Codmice @9 | 32912 mail.com |
| | | | rt notification) |
| | Pere 2 of Person | | 337-9440 Daytime Telephone Number |
| Enclosed is a check for t | | | |
| \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | S60.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Roque ? Brot | hers LLC |
|---|--|
| (Name of the Limited Liability Compa (A Florida Limited | any as it now appears on our records.) Hill 1. 4.3 Liability Company) |
| The Articles of Organization for this Limited Liability Company | A |
| Florida document number <u>L18000167253</u> . | , , |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liab | oility company here: |
| | |
| The new name must be distinguishable and contain the words "Limited Liabi | ility Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 4835 W. Eau Gallie Blud |
| (Principal office address MUST BE A STREET ADDRESS) | Melborne FL 32934 |
| | #.IS3 |
| Enter new mailing address, if applicable: | PO BOX 120932 |
| (Mailing address MAY BE A POST OFFICE BOX) | Melburne FL 32912 |
| | |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | address on our records, enter the name of the new registered |
| | |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| | , Florida |
| | City 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

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 | Angellus Cancio | 330 Vesta Circle | □Add |
| | | Melbourne FL 32901 | 🗆 Remove |
| | | | XChange |
| AMBR | Irene Perez | 5161 walker Ave | □Add |
| | | Melbourne FL 329 | <u>04</u> □Remove |
| | | | ※ Change |
| | | | 🗆 Add |
| | | | □Remove |
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| HUIE. | ive date, if other than the date of filing: |
| e recor | d 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 led. |
| rd is fi | |
| rd is ti | Oct. 25 . 2021. |
| ord is fi Dated | Oct. 25 2021. Signature of a member or authorized representative of a member |