Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BARNES WALKER, CHARTERED

Account Number : 102371002705

: (941)741-8224

Fax Number

; (941)708-3225

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

www.awalker@barneswalker.com

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAOV, LLC

Certificate of Status	0
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Page Count	
Estimated Charge	\$25.00

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EXAMINE

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAG	OV, LLC		
(Name of the Limited Liability Com (A Florida Limite	d Liability Compan	cars on our records.)	
The Articles of Organization for this Limited Liability Compa			and assigned
Florida document number L18000173831			
This amendment is submitted to amend the following:		· · ·	
A. If amending name, enter the new name of the limited li	ability company	here:	
The new name must be distinguishable and contain the words 'Limited Li-	ability Company," th	e designation "LLC"	or the abbreviation "L.L,C."
Enter new principal offices address, If applicable:			
(Principal office address MUST BE A STREET ADDRESS)			<del></del>
			<u></u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		·.	
(Milling Balless MAT BE AT 03) OF FICE BOAT			0:
		· ·	V:
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address ere:	on our records,	<del></del>
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			
<del></del>	Enter	Florida street address	
		, Flor	
	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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Gino A. Taliento		🖸 Add
		5037 Ringwood Meadow, Suite G Sarasota, FL 34235	■ Remove
		01110011,1201100	Remove
			Change
MGR	RAOV Management Company, LLC	5037 Ringwood Meadow, Suite G Sarasota, PL 34235	
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ective date, if oth effective date is liste e: If the date inse ument's effective	rted in this block	does not meet t	the applicable	te of filing or statutory fili	more than 90 day ng reculremen	(optional) is after filing.) Puts, this date wil	ursuant to 605 I not be liste
record specifie he 90th day af	s a delayed ef fter the record	fective date is filed.	, but not ar	effective	time, at 12	:01 a.m. on	the earlie
ed August 22	Adwy H	20 M/d)	) 				

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Filing Fee: \$25.00