

L18000194654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

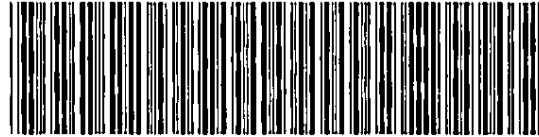
(Document Number)

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09/07/18--01016--015 \*\*52.50

2018 SEP 24 PM 2:56  
SECRETARY OF STATE  
CLERK OF COURTS

FILED

M. MILLIGAN

SEP 26 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 15, 2018

TRACY RICHARDSON  
238 DAVID AVE  
LEHIGH ACRES, FL 33936

SUBJECT: ROMO RICHARDSON GROUP LLC  
Ref. Number: L18000194654

We have received your document for ROMO RICHARDSON GROUP LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan  
Senior Section Administrator

Letter Number: 618A00019258

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Romo Richardson Group LLC  
Name of Limited Liability Company

2018 SEP 26 AM 10:42

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephanie Romo  
Name of Person

Romo Richardson Group LLC  
Firm/Company

238 David Ave  
Address

Lehigh Acres FL 33936  
City/State and Zip Code

romorichardson@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Romo at (239) 877-1958  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|--|

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2018 SEP 24 PM 2:50

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

SECRETARY OF STATE  
4440000000000000

The Articles of Organization for this Limited Liability Company were filed on Aug 14, 2018 and assigned Florida document number L1800194654.

This amendment is submitted to amend the following:

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

Romo Richardson Group LLC

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)

238 David Ave  
Lehigh Acres FL  
33936

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Tracie Richardson

New Registered Office Address:

238 David Ave

Enter Florida street address

Lehigh Acres

City

Florida 33936

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.

Tracie Richardson  
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>	<u>Address</u>	<u>Type of Action</u>
MGR/Owner	Stephanie Lemo	238 David Ave	<input checked="" type="checkbox"/> Add
		Lehigh Acres FL	<input type="checkbox"/> Remove
		33936	<input type="checkbox"/> Change
AMBR	Chad Richardson	238 David Ave	<input checked="" type="checkbox"/> Add
		Lehigh Acres FL	<input type="checkbox"/> Remove
		33936	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

9/21/18

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 9/21/18 \_\_\_\_\_

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Stephanie M. Romo  
Typed or printed name of signer

Typed or printed name of signee

**Filing Fee: \$25.00**

2010 SEP 24 PM 2:50