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MILABASSEE FLORIUS

2022 JUL 14 PH 6: 25

SEP 2 8 2022 3. PRATHER

## **COVER LETTER**

SUBJECT: <u>(RP</u>	Consulting L Name of Lim	LC ited Liability Company	
	Amendment and fee(s) are sub	-	
	Phillip !	Warner Name of Person	
	Infinite R	Slyu Enterprises,	LC
	14801 SU	N 18th St Address	<del></del>
	Miramar	FI 33027 City/State and Zip Code D Inifinitely (1) to be used for future annual report notion	
For further information c	E-mail address: (  oncerning this matter, please ca		fication)
Phillip We Name o	r Ne r f Person	at ( <u>000</u> ) <u>479 -</u> Area Code Daytim	7746 e Telephone Number
Enclosed is a check for the	ne 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Section Division of Corporations

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**

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CRPG Consulting, LLC	
(RPG Consulting; LLC  (Name of the Limited Liability Companion (A Florida Limited L.)	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>LISCOO 240 64 2</u> . This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liability Limited Liability Li	LLC
The new name must be distinguishable and contain the words "Limited Liabili"	
Enter new principal offices address, if applicable:	PNB 1458 1000 Brickell Ave
(Principal office address MUST BE A STREET ADDRESS)	Ste 715
	Miami Fl 33131
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	PMB 1458 1000 Brickell Ave Ste 715 Miami Fl 33131
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: Philli	p Warner
New Registered Office Address: PM13 14	158 1000 Brickell Ave Ste 715  Enter Florida street address
Mia	riy Florida 33131 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	ing some

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR Phillip A Werner		PMB 1458 1000 Brickell	Ave nodd
		Ste 715	□Remove
		Miami FT 33131	i <del>S</del> Change
			🗆 Add
			□Remove
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ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of filing or more	than 90 days after filing.) Pursuant to 605.0207
te: If the date inserted in this block does not meet the applicable statutory filing recument's effective date on the Department of State's records.	quirements, this date will not be listed as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t	he earlier of: (b) The 90th day after the
Signature of a member or authorized representative of a Phillip Warner	7022 JUL II, PH 6: 25 VALLAJASSEL FLORIDA member
$_{\text{red}}$ $\frac{1-1-2027}{2}$	) JC !
0 ,	35 J
_ / War	V. (T)
Signature of a member or authorized representative of a	i member $\frac{1}{2}$
Philip Warner Typed or printed name of signee	
VI. 11'A 141 A/	