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Div	ision of Cor	porations		
SUBJECT:	RALSAWA			
SOBJECT.			ited Liability Company	
The enclosed	d Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please returr	all correspo	ndence concerning this matter	to the following:	
		Nicole Villarroel		
			Name of Person	
		Hackleman, Olive & Judd,	P.A.	
			Firm/Company	
		2426 East Las Olas Blvd.		
			Address	
		Fort Lauderdale, Florida 33	3301	
		nvillarroel@hojlaw.com	City/State and Zip Code	
		E-mail address: ()	to be used for future annual report notif	ication)
For further i	nformation c	oncerning this matter, please ca	all:	
Nicole Villa	птоеl		954 334-2250 at ()	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is:	a check for th	ne following amount:		
■ \$25.00 F	iling 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:

TO:

Registration Section

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

RAI SAWAK, LLC

(Name of the Limi	ited Liability Compan (A Florida Limited Li	y as it now appears on our re ability Company)	cords.)	•		
The Articles of Organization for this Limited L Florida document number L18000276120	Liability Company v	vere filed on 11/29/2018		aı	nd assig	gned
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liabil	ity company here:				
N/A						
The new name must be distinguishable and contain the	words "Limited Liabilit	y Company," the designation	*LLC" or th	e abbreviati	ion "L.L	.C."
Enter new principal offices address, if appli	cable:	8932 S Shadow Bay Drive	:, Orlando.	Florida 31	2825	
(Principal office address MUST BE A STRE	ET ADDRESS)				· <u>-</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> E BOX)</u>	8932 S Shadow Bay Drive	e, Orlando.	. Florida 3	2825	
B. If amending the registered agent and registered agent and/or the new registered of New Revistered Agent:	office address here	:	ords, <u>en</u>	ter the n	ame 0	f the
Name of New Registered Agent: New Registered Office Address: Hackleman, Olive & Judd, P.A. 2426 East Las Olas Boulevard Enter Florida street address						
	2420 East Las O		ddress		<u> </u>	Ti
	Fort Lauderdale		Florida	33301	=	·
		City		S-Zip	Otle	

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

h Vellarvoel

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
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ctive date, if other than the offective date is listed, the date must if the date inserted in this blooment's effective date on the De	be specific and cannot be priock does not meet the appli	cable statutory filing r	رور (optional) د than 90 days after filing.) Pu	rsuant to 605.0
record specifies a delayed he 90th day after the reco	effective date, but no ord is filed.	ot an effective tin	ne, at 12:01 a.m. on	the earlier
October 14	2019			
Michh	Signature of a member or aut	E		
		a compressor and accompany of the contract of		

Page 3 of 3

Filing Fee: \$25.00