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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RC TAX SERVICE LLC

Account Number : I20140000083 Phone : (407)932-0040

Fax Number : (407)520-5473

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

<b>Email</b>	Address:_		 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VILLALOBOS & ULLOA LLC

الرسوين كأنب الكاف فالكاف فالمتحدد والمساور والمراوان	
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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJEC	VILLALO	BOS & ULLOA LLC		
SCOJEC	,1;	Name of Lin	nited Liability Company	
The enci-	osed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please re	twn all correspo	ondence concerning this matte	r to the following:	
		CRISOLA VIOLETA VI	LLALOBOS CARRASQUERO	
			Name of Person	
		VILLALOBOS & ULLO	A LLC	
			Firm/Company	
		2364 RAPOLLO DR		
			Address	
		KISSIMMEE, FL 34741		· · · · · · · · · · · · · · · · · · ·
		CRISVVCU@HOTMAIL.	City/State and Zip Code	16 E
		E-mail address:	(to be used for future annual report notification)	्राः स
For furth	er information c	oncerning this matter, please o	eall:	
CRISOL	a violeta vi	ILLALOBOS CARRASQUEI		
	Name o	f Person	Area Code Daytime Telepho	one Number
Enclosed	is a check for th	e following amount:		
■ \$25.0	00 Filing Fee	S30.00 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 S Division of C P.O. Box 632 Fallahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	see

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
	(A Florida Limited Liability Company)	
The Articles of Organization for this Limited	Liability Company were filed on 02/0	1/2019 and assigned
Florida document number L19000033011	·	
his amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>e</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	
Principal office address MUST BE A STRE	EET ADDRESS)	
		·
	<u></u>	
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or	registered office address on our rec	cords, enter the name of the new regis
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or	registered office address on our rec	
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or gent and/or the new registered office addr	registered office address on our recess here:  CRISOLA VIOLETA VILLALOBO  2364 RAPOLLO DR	OS CARRASQUERO
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address  Name of New Registered Agent:	registered office address on our recess here:  CRISOLA VIOLETA VILLALOBO  2364 RAPOLLO DR	
<u> </u>	registered office address on our recess here:  CRISOLA VIOLETA VILLALOBO  2364 RAPOLLO DR	OS CARRASQUERO

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.

CASO Q VILLA DOS

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>	Address	Type of Action
			□Add
		·	□Remove
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n effective date is listed, the de te: If the date inserted in cument's effective date on	the Department of State's records.  Frective date, but not an effective times.	ne, at 12:01 a.m. on the earlier of: (t	b) The 90th	ı day after	the
n effective date is listed, the de te: If the date inserted in cument's effective date on ecord specifies a delayed ef	ffective date, but not an effective tin	ne, at 12:01 a.m. on the earlier of: (t	b) The 90th	a day after	the

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