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COVER LETTER

i. H	•	CC	OVER LETT	ΓER			
	TO: Registration Section Division of Corporation	18					
ક	RKG REALTY LLC						
э 1	SUBJECT:	Name of Limited	Liability Company				
- خو	-						
	'The enclosed Articles of Amendm	ent and fee(s) are submitt	ed for filing.				
	Please return all correspondence of	oncerning this matter to the	he following:				
	KEV	IN BAKER					
ei T	<u> </u>		Name of Person				
	RKO	G REALTY	THE ST LETTON				e e
			Firm/Company				IL
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	<i>7.</i>		Address			が発出	
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4.1.7	KEVI	NBAKER227@GMAIL.	ity/State and Zip Co COM	ode		12 mg	Ξ
	<u> </u>	E-mail address: (to be	used for future ann	ual report notificati	on)		
	For further information concerning	g this matter, please call:					
: - - :	KEVIN BAKER		508 at ()	726-9696			
	Name of Person		Area Code	Daytime Tel	ephone Number		
A),	Enclosed is a check for the follow	ing amount:					
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in the second		0.00 Filing Fee &	□ \$55.00 Filing For Certified Copy (additional copy is	,	Certified	te of Status	
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`; =;	MAILING ADI Registration Sec			EET/COURIER / tration Section	ADDRESS:		
	Division of Corp		Divisi	ion of Corporation	ıs		
	P.O. Box 6327 Tallahassee, FL	32314		n Building Executive Center	Circle		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RKG REALTY LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our r nited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Comp. L19000049280 Florida document number	pany were filed on 2/19/19	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited"	Liability Company " the designation	"I.I.C" or the abbreviation "I.I.C."
Fig. 1.	manning company, the designation	ince of the appreviation E.T., e.
Enter new principal offices address, if applicable:	- · · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
		AR -
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
, —		
l		다. -
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		cords, enter the name of the
Name of New Registered Agent:		
New Production of OCC - Address		
New Registered Office Address:	Enter Florida street d	address
;-		_, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 amendi	ng Authorized Person(s) authorized	to manage, enter the title, name, and address	of each person bein
or remove MGR =	d from our records:		
AMBR =	Authorized Member		
Title	<u>Name</u> KEVIN JARED BAKER	Address 400 SW 1ST AVENUE, #803	Type of Act
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fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or mote: If the date inserted in this block does not meet the applicable statutory filing cument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective t The 90th day after the record is filed.	ime, at 12:01 a.m. on the earli	er (
ned February 28 . 2019	_	
Signature of a member or authorized representative		

Page 3 of 3

Filing Fee: \$25.00