## L19000054514

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,
PICK-UP WAIT MAIL
(Duginana Fatity Nama)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
, ,

Office Use Only



300380069763

01/26/22--01007--025 \*+25.00



A. BUTLER FEB - 4 2022

## **COVER LETTER**

Registration Section Division of Corporations

TO:

	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	EMILIO DE COUTO HO	RN	
		Name of Person	<del></del>
	COUTO ENTERPRISE I.	LC	
	<del></del>	Firm/Company	
	1108 SHOREVIEW CIRC	TLE APT 100	
		Address	
	CASSELBERRY, FL 3276	07	
	_	City/State and Zip Code	
	emilio.horn@gmail.com		
	E-mail address: (	to be used for future annual report no	tification)
For further information ec	oncerning this matter, please c	ali:	
EMILIO DE COUTO HORN		407 714-3419 at ( )	
Name of Person			ne Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of Co	ection orporations	Street Address: Registration Se Division of Co	rporations
P.O. Box 6321	<i>(</i>	The Centre of	l'allahassee

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COUTO ENTERPRISE LLC			1 1.
(Name of the Limited	l Liability Company as it now ap V Florida Limited Liability Compan	pears on our records.)	<del></del>
(1	A Florida Limited Liability Compar	ny)	, Ē
			,
he Articles of Organization for this Limited Liab	bility Company were filed on	02/28/2019	and assigned
Plorida document number L19000058514			
his amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company	here:	
RYDER GROUP LLC			
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," th	ne designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:		
Principal office address MUST BE A STREET	ADDRESS)		
			<del></del>
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BO	OX)		
The state of the s		<del>-</del>	
			<del></del>
<ol><li>If amending the registered agent and/or reg</li></ol>	istered office address on ou	r records, <u>enter the n</u>	ame of the new regist
gent and/or the new registered office address	<u>here</u> :		
Name of New Registered Agent:			
Name of New Registered Agent;		<del></del>	
New Registered Office Address:			
	Enter I	Horida street address	
		Florida	
	City		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.

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>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Remove
		<del>-</del>	□ Change
		<del></del>	□Add
			□Remove
			□Change
			□ Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

				<u></u>
<del></del>				<del></del>
			·	
<del></del>				<del></del>
	<del></del> -			
		·		
			•	
<del></del>	<u> </u>			
-				
			<del></del>	
				<del></del>
	01/19/202	2		
Effective date, if other than the d	late of filing:		(optional) han 90 days after filing.) Pu	rsuant to 605,0207 (3)
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the appl	icable statutory filing re-	quirements, this date wil	not be listed as the
document's effective date on the 19ep.	artificial of State 8 record	.s.		
he record specifies a delayed effective	date, but not an effective	time at 12:01 a.m. on th	he earlier of: (h) The 90	Ith day after the
ord is filed.				an day after the
L 10	2022			
Dated	. 2022	·		
Cini	ignature of a member or aut			
<u></u>	in Horn	horized tenresentative of a	member	<del></del>
	ignatine of a member of aut	nonzed representative or a	memoci	
EMILIO DE COUTO HO		normed representative of a	memoer	