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COVER LETTER

Division of Col	rporations		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	RAMON AGUERO		
	R44, LLC	Name of Person	
	4340 E 10 COURT	Firm/Company	
	HIALEAH, FL 33013	Address	
	R44FL2019@GMAIL.COM		
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notif all:	ication)
RAMON AGUERO		786 210-9194 at ()	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Fiting Fee & Certificate of Status	☐ \$55,00 Fiting 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

R44, LLC			
(Name of the Limited) (A	Liability Compa Florida Limited	ny as it new appears on our records Liability Company)	ט
The Articles of Organization for this Limited Liability Company were filed on 04/02/2019 Florida document number 1.19000090950			and assigned
his amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of th	ne limited liab	oility company here:	
<u></u>			
he new name must be distinguishable and contain the word	ls "Limited Liabi	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		4340 E 10th COURT	
		HIALEAH, FL 33013	AL SE
nter new mailing address, if applicable:		4340 E 16th COURT	£255
(Mailing address MAY BE A POST OFFICE BOX)		HIALEAH, FL 33013	- C
			(C) (A)
			<u>S</u>
 If amending the registered agent and/or registered agent and/or the new registered office 			, enter the name of the ne
Name of New Registered Agent:	RAMON AGUERO		
New Registered Office Address:	10620 NW 88t	h STREET, APT 102	
The state of the s		Enter Florida street address	1
	DORAL	, Flo	orida 33013
		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 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

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	JORGE FERNANDEZ	10511 W 35 WAY	
		HIALEAH GARDENS, FL 33018	5 %
			■ Remove
			Change
. 1 775	JEISABEL A GONZALEZ	10620 NW 88th STREET NO. 102	
AMR			
		DORAL, FL 33178	
			Remove
		-	Change
			□ Add
		-	D X((()
			□ Remove
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		(C)	<u> </u>
i an eile Note:	ve date, if other than the date of filing: certive date is listed, the date must be specific and cannot be prior to date of filing or more than 9 If the date inserted in this block does not meet the applicable statutory filing require ent's effective date on the Department of State's records.		بِهِ 20207 (2 ed as th
e rec	ord specifies a delayed effective date, but not an effective time, at 90th day after the record is filed.	12:01 a.m. on the earli	er of:
Dated _	July 1st, 2019.		
	Signature of a member or authorized representative of a member	ber	

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Filing Fee: \$25.00