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(Ke	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Name)
(Dc	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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2000 m 13 PH 4:08

COVER LETTER

TO:

Registration Section

Division of Cor	porations		
RR SONS	MANAGEMENT LLC		
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:	
	VIK PARTI ESQ.		
		Name of Person	
	PARTI & OLIVEIRA PLI	.C	
		Firm/Company	
	7380 SAND LAKE ROAL) SUFTE 500	
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	****
	vik@po-law.com	to be used for future annual report n	oti finatom)
For further information c	oncerning this matter, please c		ouncation)
VIK PARTI		407 834-4441 at ()	
Name o	i Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing 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 Addre Registration! Division of C	Section	<u>Street Address:</u> Registration 5 Division of C	Section
P.O. Box 632		The Centre of	•
Tallahassee,			roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

27.3" "15 PH 4:08

RR SONS MANAGEMENT LLC

(Name of the Limited Liability Company as it now appears on our records,)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 05/09/2019	and assigned
Florida document number L19000126096		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter th</u>	ie name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		• •
	, Flor	ridaZip 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>	<u>Address</u>	Type of Action
MGR	RADHIKA JANDHYALA	6713 VALHALLA WAY	□Add
		WINDERMERE, FL 34786	■Remove
			UChange
MGR	RADHIKA J AKELLA	6713 VALHALLA WAY	≣Add
		WINDERMERE, FL 34786	□Remove
			□Change
			UAdd
			□Remove
			□ Change
			DAdd
			□Remove
			□Change
			□Add
			LIRemove
			UChange
			□Add
			□Remove
			[]Change

Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:	-	
Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:	•	
Effective date, if other than the date of filing:	-	
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Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing:		
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Signature of a mamber or anthorized representative of a member		
Signature of a member or authorized representative of a member	d is tī	MAY 4 2020
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	d is tī	MAY 4