Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600 Phone

: (323)962-3889 Fax Number

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROUGE & SERVICES LLC

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Registration Section

## **COVER LETTER**

Div	isios of Corp	SERVICES LLC		
SUBJECT:			ted Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return	all correspon	dence concerning this matter t	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
		and an all and the File	Firm/Company	
		101 N Brand Blvd 11th Fl	Address	
		Glendale, CA 91203	Adcress	
		mp.78@hotmail.com	City/State and Zip Code	
For further	information o	E-mail address: (t		·
Cheyenne		f Pद्य+भा	800 773-088 at ()	ytime Telephone Number
Enclosed is	a check for the	ne 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)
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Registration Section
Division of Corperations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROUGE & SERVICES 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 06/17/2019 \_ and assigned Florida document number L19000159010 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 "LLC" 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: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida j 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 fide, name, and address of each person being adde	ø
or removed from our records:	

MGR = M AMBR = A	lanager ,uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Blanca Lopez		
		280 SW 96TH TER. PEMBROKE PINBS, FL 33025	■ Remove
			☐ Change
AMBR	Michael Perez	280 SW 96Th Ter Pembroke Pines, Florida 33025	<b>Ad</b> d
			Remove
			Change
MGR	Michael Perez	280 SW 96Th Ter Pembroke Pines, Plorida 33025	
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Note: I	te date, if other than the date of filing:
the reco	and specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of the day after the record is filed.
	7/22/20
Dated_	
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Dated_	Signature of a member or authorized representative of a member
Dated_	Signature of a member or authorized representative of a member
Dated_	Signature of a member or authorized representative of a member  Michael Perez

Page 3 of 3

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