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(Re	equestor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	"

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## **COVER LETTER**

то:	Registration S Division of Co		ببوي			
SUBJEC	RI Investm	ent Group LLC				6
SOBJEC	. I	Name of Lim	ited Liability Company		·	1906
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			•
		ondence concerning this matter	_			
		Marisol Mendoza				
			Name of Person			
		RI Investment Group LLC				
			Firm/Company			
5337 North Socrum Loop Road						
		Address				
		Lakeland, Florida 33811				
			City/State and Zip Co	жle		
		marisol@builtbyjam.com E-mail address: (	to be used for future and	nual report notifi	cation)	
For furth	er information of	concerning this matter, please co	all:			
Marisol	Mendoza		863	606-1919 Ext		
-	Name o	of Person	at () Area Code	Daytime	Telephone Number	
Enclosed	l is a check for t	he following amount:				
<b>≡</b> \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing F Certified Copy (additional copy is	y	☐ \$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is enc	
	Mailing Addre			t Address:		
	Registration Division of C			istration Section of Corp		
	P.O. Box 633			Centre of Ta		

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	TO	
ARTI	CLES OF ORGANIZATION	6
	OF	19 OCC 18 M 9:21
NII		6 W
R1 Investment Group LLC (Name of the Limite)	ed Liability Company as it now appears on our records.)	<del></del>
(.	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	્ર 🦠
ne Articles of Organization for this Limited Lia	ability Company were filed on August 9, 2019	and assigned
orida document number L19000203167		
his amendment is submitted to amend the follow	wing:	
. If amending name, enter the new name of	the limited liability company here:	
he new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
nter new principal offices address, if applica		
riter new principal offices address, il applica Principal office address MUST BE A STREET		
Tincipul office unuress in OST DE A STREET	TADDRESSy	
gent and/or the new registered office address	egistered office address on our records, enter the i	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address	
	. Florida	   Zip Code
ew Registered Agent's Signature, if changing Ro	·	
hereby accept the appointment as registered rovisions of all statutes relative to the prope	l agent and agree to act in this capacity. I further or and complete performance of my duties, and I detered agent as provided for in Chapter 605, F.S.	ım familiar with and

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Richard Mendoza Sr.	5337 North Socrum Loop Road Unit 229	
		Lakeland, Florida 33809	□Remove
			□Change
<del>.</del>			□Add
			□ Remove
			□ Change
			🗆 Add
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lf an effe <u>Note:</u> I	ctive date, if other than the date of filing:
e record rd is tile	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after thed.
Dated _	December 11th 2019
	Signature of a member or authorized representative of a member