Division of Corporations Electronic Filing Cover Sheet

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(((H22000004518 3)))



H220000045183ABCVV

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: LARSON ACCOUNTING AND CONSULTING SERVICES LLC Account Name

Account Number : I20160000067 : (407)370-3686 Phone : (407)370-3120 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 RT PROMOTION LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Help

Ź TO:18506176383 FROM:4073703120 Page: 01/4/2022 13:03 PM

COVER LETTER

TO: Registration Se Division of Cor			·
	OTION LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter	o the following:	
	CAROLINE G LARSON		
		Name of Person	
	LARSON ACCOUNTING	GROUP	
		Firm/Company	
	7901 KINGSPOINTE PRK	W. SUITE 17	
		Address	
	ORLANDO, FL		
		City/State and Zip Code	
	CAROL@LARSONACC.C		
	E-mail address: (to be used for future annual report not	(lication)
For further information of	concerning this matter, please co	all:	
CAROLINE LARSON		407 3703686 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RT PROMOTION LLC						
(Name of the Limi	ted Llability Compa (A Florida Limited I	ny as it now appears on our re- liability Company)	cords.)			
The Articles of Organization for this Limited L Florida document number L19000241177	iability Company	were filed on		and as:	signed	
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name of	of the limited liab	llity company here:				
N/A						
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "	LLC" or the abl	breviation "L	.L.C."	
Enter new principal offices address, if applie	cable:	N/A				
(Principal office address MUST BE A STREE	ET ADDRESS)					
			 			
Enter new mailing address, if applicable:		N/A				
(Mailing address MAY BE A POST OFFICE	BOX)		 			_
B. If amending the registered agent and/or agent and/or the new registered office address	registered office ess here:	address on our records, e	nter the nam	cof, the ne	122 J	<u>stere</u>
Name of New Registered Agent:	N/A			38574 2877 P	至一	FILE
New Registered Office Address:		E Elmida	ddesec	inc.	70	0
		Enter Florida street a	. Florida	LVI S.	2: ٢	
		Cin	_, riofiua <u></u>	7.ip 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.

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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
MRG	BEATRIZ POIANO VOGEL	7901 KINGSPOINTE PARKWAY SUITE 17	□Add
		ORLANDO, FL 32819	≣Remove
			□Change
			□Remove
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N/A			
			
			
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	01/04/2022		
ective date, if other than the date o	of filing:	(optio	nal)
effective date is listed, the date must be specter. If the date inserted in this block does	rific and cannot be prior to date is not meet the applicable si	e of filing or more than 90 days after tarutory filing requirements, this	date will not be liste
cument's effective date on the Departme	ent of State's records.	, •	VA_
			2022 SE :
cord specifies a delayed effective date,	but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after
s filed.			
			385 74.
JANUARY, 04 ced	2022		PA E. F.
	MXXXLAS		- SI - S
_	HOPPIN		2: 43 STATE LORI O A
	re of a member or authorized	representative of a member	= ພ

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