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Office Use Only



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COVER LETTER

	Registration Sec Division of Corp				
cun iez		DEVELOPMENT LLC			
SUBJEC	.1;	Name of Limi	ited Liability Company		
The encl	osed Articles of a	Amendment and fee(s) are subt	mitted for filing.		
Please re	turn all correspoi	ndence concerning this matter t	to the following:		
		JUSTIN BASIL			
			Name of Person		
		ROCWELL DEVELOPME	ENT LLC		
Firm/Company					
		2419 W KENNEDY BLVD SUITE 100			
			Address		
		TAMPA FL 33609			
		City/State and Zip Code JUSTIN@ROCWELLINVESTMENTS.COM			
		E-mail address: (t	to be used for future annual report notifi	cation)	
For furth	er information co	oncerning this matter, please ca	all:		
CODY			813 251-0544 at ()		
	Nume of	Person		Telephone Number	
Enclosed	is a check for th	e following amount:			
\$25.0	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:

TO:

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



(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 9/26/2019 Florida document number L19000243726 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 __

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.

City

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
MGR	RGR INVESTMENTS LLC	2711 W FOUNTAIN BLVD	
		TAMPA EL 22600	Add
		TAMPA FL 33609	■ Remove
			Change
MGR G	GRAY IVY INVESTMENTS LLC	2711 W FOUNTAIN BLVD	
		TAMPA FL 33609	
			🗆 Remove
			Change
			□ Add
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Note: 1	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
Dated	10/19/19
_	— , , , , , , , , , , , , , , , , , , ,
	Signature of a member or anthorized representative of a member
	JUSTIN BASIL
	typed or printed name of signed