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COVER LETTER

TO: Registration Section Division of Corporations

RB US BETEILIGUNGS LLC

SUBJECT: ____

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marc Tetzner

Name of Person

Firm/Company

2340 NE 48th Court

Address

Lighthouse Point, FL 33064

City/State and Zip Code

mtetzner@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Marc Tetzner
 954
 663-1100

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

E \$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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1.75

	Or	To Store to
		On GALC
RB US BETEILIGUNGS LLC		
(Name of the Limited Lin	bility Company as it now appears on our records.) rida Limited Liability Company)	~ ~ ~ ~ ~
17710	white that the tradenty Company'	9 , 10 ₄
The Articles of Organization for this Limited Liabilit	y Company were filed on 10/16/2019	19 000 (1.1.4) (1.1.4) 44 44 9 000 (1.1.4) (1.1.4) 10 00 (1.1.4) (1.1.4) (1.1.4) 10 00 (1.1.4) (1.1.4) (1.1.4) (1.1.4) 10 00 (1.1.4) (1
Florida document number L19000260144		
This amendment is submitted to amend the following	1.	
A. If amending name, <u>enter the new name of the l</u>	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company." the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	· ···
Enter new mailing address, if applicable:		
		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		••••••••••••••••••••••••••••••••••••••
B. If amending the registered agent and/or registe		ne of the new registered
agent and/or the new registered office address her	<u>*e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florida	
—	The Ria	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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	<u>Type of Action</u>
AMBR	Ralf Bueschl	2340 NE 48th Court, Lighthouse Point, FL 33064	🔳 Add
			🗆 Remove
			🗆 Change
			🗆 Add
			🗆 Remove
			⊡Change
	······································		□ Add
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			🗌 Remove
			□Change

	•	•

Page 2 of 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	<u></u>
. Effective date, if other than the date of filing: (optional)	
C. Effective date, if other than the date of filing:	at to 605,0207 (3)(ł a be listed as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the b) The 90th day after the record is filed.	e earlier of:
Dated 2019	
O. TIN	
Signature of a member or authorized representative of a member	

Marc Tetzner

Typed or printed name of signee

Filing Fee: \$25.00