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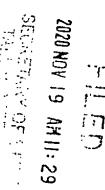
(Requestor's Name)
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(Document Number)
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IA-12/20

COVER LETTER

TO:

Registration Section Division of Corporations

SURIFCT:	· RCL Commo	rial LLC	ął
30b#6c17	Name of Limi	ited Liability Company	
The enclosed Articles of z	Amendment and fee(s) are sub-	mitted for filing.	
Piease return all correspor	ndence concerning this matter	to the following:	
	Ste	ophen leo	
		Name of Person	
	RCC	Commercial LL	C
		Firm/Company	
	3077 E	Bay Tree De	
		Address	
	<u> </u>	City/State and Zip Code	6
		City/State and Zip Code	
	E-mail address: (to be used for future annual report n	notification)
For further information of	oncerning this matter, please ca	·	
	-	••••	
Stephen	1 60	$\frac{1}{\text{Area Code}} \frac{305}{903}$	0097
Name of	Person	Area Code Day	time Telephone Number
Enclosed is a check for th	e following amount:		
D \$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 S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7		Section Forporations of Tallahassee Froe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RCL Commercial LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
he Articles of Organization for this Limited Liability Company were filed on/_ 79- 7070 and assigned lorida document number 2 2 00000 3 0 6 9 2	d
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liability company here:	
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C.	
inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	_
] -
- 19 To the second of the seco	_
Inter new mailing address, if applicable:	7
Mailing address MAY BE A POST OFFICE BOX)	J
3. If amending the registered agent and/or registered office address on our records, enter the name of the new regent and/or the new registered office address here:	<u>gis</u>
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
Clasida	
Sew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply v provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a peccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability	nd

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_being a or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Actio
MGR_	Sheron Leo	3077 Bay Tree DR, Unkolo FL 32	ZAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			ClAdd
			□Remove
			□ Change
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Note: I:	e date, if other than to tive date is listed, the date of the date inserted in this not's effective date on the	block does not meet	the applicable statute	ing or more than 90 da	(optional) ys after filing.) Pursuant nts, this date will not b	to 605 e liste
documei						
ie record	specifies a delayed effec d.	rtive date, but not an c	effective time, at 12:0	I a.m. on the earlie	r of: (b) The 90th day	y after
ne record ord is file			effective time, at 12:0	1 a.m. on the earlie	r of: (b) The 90th day	y after
ie record ord is file	d.		effective time, at 12:0	1 a.m. on the earlie	r of: (b) The 90th day	y after
ne record ord is file	d.	J	ber or authorized repres	3	r of: (b) The 90th day	y aftei

Filing Fee: \$25.00