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(Requestor's Name)			
(Ad	dress)		
(Address)			
(Cit	y/State/Zip/Phone	e #)	
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(Bu	siness Entity Nam	ne)	
(Do	ocument Number)		
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COVER LETTER

10:	Division of Cor	ection porations	3 .		
SUBJE	EM RBT L		· A	,	
SOBJE	¥•• <u> </u>	Name of Lim	ited Liability Company	·	
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspo	endence concerning this matter	to the following:		
		Elsa F Martinez			
			Name of Person		
			Firm/Company		
		1611 SW 125 Ct			
			Address		
		Miami, FL 33175			
			City/State and Zip Code		
		elsitajessy@hotmail.com			
For furth	ner information c	e-mail address: (oncerning this matter, please c	to be used for future annual all:	report notification)	
Elsa F N	Martinez		786 54 at ()	7-4823	
	Name o	f Person	Area Code	Daytime Telepho	ne Number
Enclosed	I is a check for th	ne following amount:			
■ \$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl		\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EM RBT LLC

.ggvg (#1114 PM 34.23

(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 I	Liability Company were	filed on _	02/25/2020	and assigned
Florida document number	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability c	ompany h	i <u>ere</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Cor	npany," the	designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			·····
		 -		
Enter new mailing address, if applicable:	<u> </u>			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
		 .		
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office addre	ss on our	records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	Elsa F Martinez			
New Registered Office Address:	1611 SW 125 Ct			
		Enter Flo	orida street address	
	Miami		, Floric	ia <u>33175</u>
	r:	ity		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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Elsa F Martinez	1611 SW 125 Ct	
		Miami, FL 33175	□Remove
			□Change
AMBR	Elsa F Martinez	1611 SW 125 Ct	≣Add
		Miami, FL 33175	□ Remove
			Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Remove
			Change

. II ame	nding any other information	, enter change(s) here:	(Attach additional shee	ets, if necessary.)	
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(If an eff Note:	ive date, if other than the date ective date is listed, the date must be a lf the date inserted in this block ent's effective date on the Depar	specific and cannot be prior to does not meet the applical	o date of filing or more than 9 ble statutory filing require	(optional) 0 days after filing.) Pursuant ments, this date will not b	to 605.0207 (3) oe listed as the
the record cord is fil	d specifies a delayed effective da led.	te, but not an effective tim	e, at 12:01 a.m. on the ea	rlier of: (b) The 90th da	y after the
Dated	July 14	2020	<u>.</u>		
	6:2	nature of a member or author	and apparentation of a second	har	
		nature of a methoer or author	лео тергезепвануе от а тет	arci	
	Elsa F Martinez				