Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ELO ENTERPRISES, INC

Account Number: I20150000109

: (561)544-8862

Fax Number : (954)697-0130

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: (En. RV5GROUP (a) GMAIL COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **RV5 GROUP LLC**

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MAY 0.5 2020

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RV5 GROUP LLC	777 136	1.		
(Name of the Limit	(A Florida Limited Li	y as it now appears o ability Computy)	(i olit tttotus")	
The Articles of Organization for this Limited Li 1,20000110544 Florida document number	iability Company v	vere filed on	2020	and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, <u>enter the new pages o</u> N/A	[the limited liabil	lity company here	:	
The new name must be distinguishable and contain the w	nords "Limited Linblin	ly Company" the desig	nation "LLC" or the abl	revietion "L.,L.,C."
Enter new principal offices address, if applic		N/A		
(Principal office address MUST BE A STREE	TADDRESS)			22.0
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE BOX)				100-2
B. If amending the registered agent and/or agent and/or the new registered office address	registered office 2: :ss here:	ddress on our reco	ords, enter the name	e of the new registere
Name of New Registered Agent:	ELO ENTERPI	RISES, INC	<u> </u>	
New Registered Office Address:	4700 NW HOC	A RATON BLVD, S		
	BOCA RATON	Cniar Florida street address N . Florida 33-131		
	<u> </u>	Chy	, Piorian	Zip Coda

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 Chairging Registered Agent, Signuture of New Registered Agent

Page 1 of 3

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>Titlc</u>	Name	Address	Type of Action
MGR	ZUCCHI CONCEPT CORP	14951 ROYAL OAKS LN # 103	
		NORTH MIAMI, FL 33181	
			— ≅Rcmove
			☐ Change
MGR	VANESSA MORA RODRIGUEZ	488 NE 18TH ST, UNIT 808	BAdd
		MIAMI, FL 33132	
			DAdd .
•		·	
			☐ Change
			□Add
			□Remove
			□ Change
			DAdd
			□Remove
			Change
			□ Add
- •			□Remove
			Change

Page 2 of 3

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Tective	date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cunnot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0
ote: If a common of the common	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed to effective date on the Department of State's records. If dispectifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
ated	01 st of MAY. 2020.
	Signature of a member or authorized representative of a member
	RODRIGO F. ZUCCHI FILHO
	Typed or printed partie of sign