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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

TO:	Registration So Division of Co				
C1/D11	Roeser Gro	oup, LLC	•		
SUBJECT: Name of Limited Liability Company					
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		Michael L. Roeser			
			Name of Person		
		Roeser Group, LLC			
			Firm/Company		
		431 Sunset Way			
			Address		
		Juno Beach, FL 33408			
		mikeroeser@outlook.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report not	fication)	
For fur	ther information c	oncerning this matter, please co	all:		
Michae	l L. Roeser		561 358-1618		
	Name o	f Person	Area Code Daytim	e Telephone Number	
Enclose	ed is a check for th	ne following amount:			
☐ \$ 25	5.00 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 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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Roeser Group, LLC (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 May 04, 2020 and assigned Florida document number L20000120325 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.I.,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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 to 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

, Florida

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Michael L. Roeser	431 Sunset Way	≡ Add
		Juno Beach, FL 33408	□Remove
			□Change
			□Remove
			Change
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Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the Defective date.	ock does not me	et the applical	date of filing or n de statutory filir	op nore than 90 days afi ng requirements, t	tional) der filing.) Pursuant to (his date will not be l	505.020 isted as
	e date, but not a	n effective tim	e, at 12:01 a.m.	on the earlier of:	(b) The 90th day a	fter the
e record specifies a delayed effectiv rd is filed.						
e record specifies a delayed effectiv rd is filed. Dated Dated		2020	_,			
rd is filed.	<u> </u>	2020	. •			
rd is filed.	Signature of a mo		zed representative	of a member		

Filing Fee: \$25.00