

120 0000 128872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

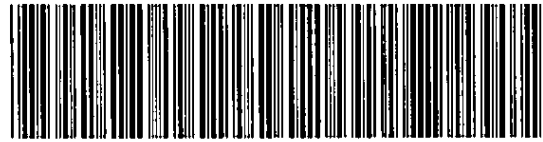
(Document Number)

Certified Copies _____ Certificates of Status _____

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09/22/22--01019--030 **43.75

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2022

FABIANA RODRIGUEZ
19106 SW 5TH STREET
PEMBROKE PINES, FL 33029

SUBJECT: THE RODRIGUEZ CAPITAL GROUP LLC
Ref. Number: L20000128872

We have received your document for THE RODRIGUEZ CAPITAL GROUP LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

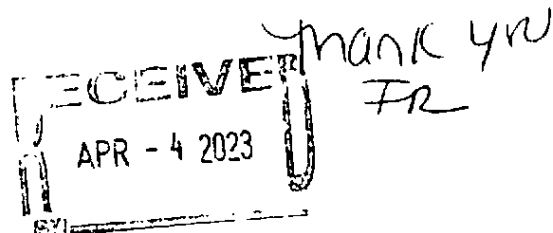
We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Michael A Hall
OPS Clerk

Letter Number: 522A00027816

Enclosed is a copy of the prior
Cashed check in the amount of \$43.75.
I did not include a payment with
this application. Since I already paid



COVER LETTER

TO: **Registration Section**
Division of Corporations

The Rodriguez Capital Group 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:

Fabiana Rodriguez

Name of Person

The Rodriguez Capital Group LLC

Firm/Company

19106 SW 5th Street

Address

Pembroke Pines, FL 33029

City/State and Zip Code

rodcapil@gmail.com

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

For further information concerning this matter, please call:

Fabiana Rodriguez

954 479-0414

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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 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

6-10-19

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE Rodriguez Capital 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 05/12/2020 and assigned
Florida document number L20000128872.

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.L.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 registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City 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

[illegible]

AMEND BUSINESS DESCRIPTION TO INCLUDE: COMPANY HAS BEEN ORGANIZED TO INVEST IN QUALIFIED OPPORTUNITY ZONE PROPERTIES

AMEND BUSINESS DESCRIPTION TO INCLUDE: COMPANY HAS BEEN ORGANIZED TO INVEST IN QUALIFIED OPPORTUNITY ZONE PROPERTIES

2007-11-19

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 13, 2023

Signature of a member or authorized representative of a member

Fabiana Rodriguez
Typed or printed name of signer