LZ0000140792

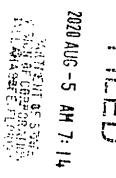
(Requestor's Name)	-
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COVER LETTER

TO: Registration Division of C	Section Corporations		
	LWORK LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	unitted for filing	
	spondence concerning this matter	- -	
	RUDY A LARA RUSO		
		Name of Person	
	RUDY LARA / AR MILL	WORK LLC	
		Firm/Company	
	161 UNDERHILL LOOP	DRIVE	
		Address	· · · · · · · · · · · · · · · · · · ·
	ORLANDO FL 32825		
		City/State and Zip Code	
	ARMILLWORKLLC@GM E-mail address: (1A11COM to be used for future annual report noti	fication)
For further informatio	n concerning this matter, please e	all:	
RUDY A LARA RUS	60	407 867-9549	
Name of Person		at () Area Code Daytim	e Telephone Number
Enclosed is a check for	or 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)
P.O. Box 6	n Section COrporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

333

AR MILEWORK LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records. a Limited Liability Company)	5
The Articles of Organization for this Limited Liability C Florida document number $\frac{L20000140792}{L20000140792}$	Company were filed on <u>05/26/2020</u>	#GE and ssigned
This amendment is submitted to amend the following:		igen (in the second of the se
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		. = 11 ==
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter th</u>	ne name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida Zip Code
	Çıı,	2.11 C.1141

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 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>	<u>Name</u>	<u>Address</u>	Type of Action
OWNER	RUDY A LARA RUSO	161 UNDERHILL LOOP DRIVE	
		ORLANDO FLORIDA 32825	□Remove
			⊡Change
			□Add
			[Remove
			□Change
		_	LAdd
			□Remove
			□ Change
··			
			□Remove
			Change
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			□Change

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n effective da <u>ite:</u> If the da	, if other than the is listed, the date in the inserted in this lective date on the	iust be specific an block does not	nd cannot be price meet the appli	cable statutory	ng or more than 9 y filing require	(optiona 0 days after fili ments, this da	ig.) Pursuant to 60	5.0207 sted as
	es a delayed effect	live date, but no	ot an effective	time, at 12:01	a.m. on the ea	rlier of: (b)	The 90th day aft	er the
is filed.								
is filed. AUGU ted	ST 3th		2020	7 /				
AUGU	ST 3th	Signature of a	Tud		UQ ntative of a mem	her		