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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 : (323)389-0502 Fax Number

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

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Email Address:

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FTC FIRM LLC

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Name	of Person		e Telephone Number	
Cheyenne Moseley		800 773-0888 at ( )	•	
For further information	concerning this matter, please c	-	·	
		to be used for future annual report noti	lication)	
	brandongordonjr1993@gm	City/State and Zip Code	<del></del>	
	Glendale, CA 91203			PH I: LL OF STATE
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	·	Firm/Company	<del></del>	70. <b>2</b>
	Legalzoom.com, Inc.		1	202 FASS
	<del></del>	Name of Person		
	Cheyenne Moseley			
Please return all corres	pondence concerning this matter	to the following:		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
		•		
	- Name of Lin	nited Liability Company	,	
SUBJECT:	MUC			•
Division of C	Corporations · · · · · ·	'		
	Corporations			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FTC FIRM LLC

To:

# ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

(Name of the Limited)	ability Company as it now appears on our recording Limited Liability Company)	12)
The Articles of Organization for this Limited Liabi Florida document number L20000152547	lity Company were filed on 06/04/2020	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
RHC Millennial Group LLC		,
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC	
Enter new principal offices address, if applicable	e:	2024 H
Principal office address MUST BE A STREET A	DDRESS)	AFTAR
Enter new mailing address, if applicable:		OF SI
(Mailing address MAY BE A POST OFFICE BO	<u></u>	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office	•	s, enter the name of the new
Name of New Registered Agent:		· ·
New Registered Office Address:	Enter Florida street addres	<b>D</b>
	Fi	orida
~	City	Zip Code
Non-Paristoned Asset's Simistons & changing Peri	rianni Àranti	•

#### WEA RESIDENCY VEGIT 3 SECURITIES IL CHRUSTOL RESIDENCY VEGIT

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, namer and address of each person, being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	Otivia Gordon	4914 1/2 San Jacinto Dallas, TX 75226	
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Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be its entire date on the Department of State's records.	sted as t
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ine	90th day after the record is filed.	•
Dated	May 15th 2024	

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