

L20000166513

WIA

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(Address)

(City/State/Zip/Phone #)

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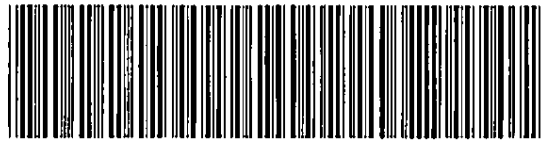
(Business Entity Name)

(Document Number)

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FILED

2023 DEC 14 PM 12:29

SECRETARY OF STATE
TALLAHASSEE, FL

SUBJECT: RIO Works, LLC
Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

Flor Nunez
Name of Person
RIO Works, LLC
Firm/Company
30325 Gidran Terrace
Address
Mound Dora, FL 32757
City/State and Zip Code
our.flor@gmail.com
E-mail address: (to be used for future annual report notification)

Flor Nunez at ()
Name of Person Area Code Daytime Telephone Number

☐ \$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)

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

RIO Works, 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 6/16/2020 and assigned
Florida document number L20000166513.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RIO Works, Professional Limited Liability Company (PLLC)

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: Flor Nunez

New Registered Office Address: 30325 Gidran Terrace
Enter Florida street address

Mount Dora Florida 32757
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]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Changing LLC to Professional Limited Liability Company (PLLC) because company provides direct

Occupational Therapy services by a Licensed and Registered Occupational Therapist (OTR/L)

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

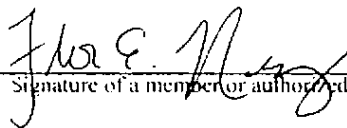
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b),

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 11th December 2023



Signature of a member or authorized representative of a member

Flor Nunez

Typed or printed name of signee