Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.

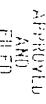
Account Number : I20040000167 : (305)377-0809 : (305)377-0781 Fax Number

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

CORPORATE Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN R-VENTURES GLOBAL, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R-VENTURES GLOBAL, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 07/09/2020	and assigned
Florida document number L20000185387		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:	283 Catalonia Ave, Suite 210, Coral Ga	btes 33134
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	283 Catalonía Ave, Suite 210, Coral Ga	ables 33134
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>enter</u> <u>e</u> :	the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	8 AM
	, Florida	Zip Codes

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Angela D. Kirton	283 Catalonia Ave	
		Suite 210	Remove
		Coral Gables, FL 33134	Change
MGR Ruben Lamothe	Ruben Lamothe	283 Catalonia Ave	
		Suite 210	Remove
		Coral Gables, FL 33134	Change
			☐ Remove
			Change
			Remove
			☐ Change
			Add
		Remove	
		Change	
			Add
			Remove
			Change

	
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Note: If the date inserted in	an the date of filing:
he record specifies a do The 90th day after th	elayed effective date, but not an effective time, at $12\!:\!01$ a.m. on the earlier one record is filed.
Dated May 18	2022
Datcu	
	Signature of a member or authorized representative of a member
Ricardo Bajanda	ns, Authorized Representative
	Typed or printed name of signee

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