

L20000221772

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : GOYENECHEA PROFESSIONAL SERVICES LLC
Account Number : I20190000078
Phone : (561)341-1582
Fax Number : (561)264-6286

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

Email Address: _____

2020 SEP 14 A 11:15

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RCNSI LLC**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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SEP 15 2020

2020 SEP 14 PM 3:49

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RCNSI LLC
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

Pablo E Goyenechea
Name of Person
TuContadorEnMiami.com LLC
Firm/Company
601 Heritage Drive, Suite 461
Address
Jupiter, Florida 33458
City/State and Zip Code
pgoyenechea@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pablo E Goyenechea at 561 341-1582
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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RCNSI 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 07/27/2020 and assigned

Florida document number L20000221772

This amendment is submitted to amend the following:

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

CAMPOSOYA LLC

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:

900 US 1 Highway North Palm Beach, FL 33408.

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

900 US 1 Highway North Palm Beach, FL 33408.

(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

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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>	<u>Type of Action</u>
MGR	Sandoval Gonzales, Nicolas	900 US 1 Highway North Palm Beach	<input type="checkbox"/> Add
		Palm Beach, Fl 33408	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Gonzales de Sandoval, Claudia S	900 US 1 Highway North Palm Beach	<input type="checkbox"/> Add
		Palm Beach, Fl 33408	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Calderon Salazar, Joaquin D	900 US 1 Highway North Palm Beach	<input checked="" type="checkbox"/> Add
		Palm Beach, Fl 33408	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Calderon Salazar, Jessenia	900 US 1 Highway North Palm Beach	<input checked="" type="checkbox"/> Add
		Palm Beach, Fl 33408	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Please, "REMOVE" SANDOVAL GONZALES, NICOLAS as MGR

"REMOVE" GONZALES DE SANDOVAL, CLAUDIA S as AMBR

"ADD" CALDERON SALAZAR, JOAQUIN D as MGR

"ADD" CALDERON SALAZAR JESSENIA as AMBR

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 SEPTEMBER 9th, 2020

Joaquin David Calderon Salazar

Signature of a member or authorized representative of a member

JOAQUIN D CALDERON SALAZAR - MGR

Typed or printed name of signer