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Division of Corporations

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From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839

Fax Number : (

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RICHARD INSURANCE AND SERVICES LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ric	HARD INSURAN	CE AND SERVICES	LLC	
(Name of the Lin	ilted Liability Comp (A Florida Limited	eny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited	Liability Company	y were filed on	01/06/2021	and assigned.
Florida document number L21000019257				
This amendment is submitted to amend the fo	llowing:			· · · ·
A. If amending name, enter the new name				P
The new name must be distinguishable and contain the		, , ,	tignation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	N/A		
(Principal office address MUST BE A STREET ADL		N/A		
		N/A	<del></del>	
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	E <u>BOX)</u>	N/A		
		N/A	· <u>-</u> :	
B. If amending the registered agent and/or agent and/or the new registered office addr  Name of New Registered Agent:		address on our red	cords, <u>enter the nar</u>	ne of the new registere
	N/A			
New Registered Office Address:	1971	Enter Floria	la street address	
	N/A		. Florida	
	<del></del>	City	, r kaldn	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

Title	<u>Name</u>	Address	Type of Action
CEO	PLANAS, RICARDO R, SR	116 SE 4TH ST APT 21	
		HALLANDALE BEACH, FL 33009	
			□Change
AMBR	PLANAS FORNARIS, RICARDO	116 SE 4TH ST APT 21	<b>≣</b> ∧ćd
		HALLANDALE BEACH, FL 33009	□Remove
			©Change
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ective date, if other than the d	late of filing:  be specific and cannot be prior to date of f	(optional)	
Se in the description in this olde	-k uues noi meel ine anniicanie grafiis	Bling or more than 90 days after filing tory filing requirements, this date	.) Pursuant to 605.020 will not be listed a
ument's effective date on the Dep	artment of State's records.	·	
avitacità bavelab e safficetta	data hurus as allessaria de la como		
filed.	date, but not an effective time, at 12:	UI a.m. on the carlier of: (b) Th	e 90th day after the
SEPTEMBER 14			
SEPTEMBER 14	2021		
,	-600		
Si	gnature of a member or authorped repre-	sentative of a member	