# 121000036259

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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### COVER LETTER

TO: Registration Secti Division of Corpo		•	
SUBJECT:	8011R5 Name of Limit	ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are subn	nitted for filing.	
Please return all correspond	ence concerning this matter to	o the following:	
	Ru	MS Garcia	·
	8011	RG LCC Finn/Company	
	8020	SW 34 ST Address	
	MIC	City/State and Zip Code  USG Job Alparts  be used implicative annual report notificat	55
	E-mail address: (to	be used the future annual report notificat	ion)
For further information con-	cerning this matter, please cal	11:	
RUTH D	Garcio	at 305) 218-2 Area Code Daytime Te	lephone Number
Enclosed is a check for the	following amount:		
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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



### RECEIVED

2022 APR 15 AM 8: 04

SECRETARY OF STATE TALLAHASSEE, FL

# FLORIDA DEPARTMENT OF STATE Division of Corporations

April 1, 2022

RUTH S GARCIA 8020 SW 34 STREET MIAMI, FL 33155

SUBJECT: 8011RG, LLC Ref. Number: L21000036259

We have received your document for 8011RG, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 222A00007675

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

8011RG.	LLC 2022 APR 15 AM 11: 23
(Name of the Limited Liability Compan (A Florida Limited Li The Articles of Organization for this Limited Liability Company v Florida document number <u>LZIOO036259</u>	ability Company)  TALLALASSEE, FL
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	ry 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)	N/A
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: Ru	1th S. Garcia 20 SW 34 ST
New Registered Office Address:	20 \$\omega\$ 34 \$\overline{5}T\$  Enter Florida street address
4	A

#### 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
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:  (optional)  dective 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)(6)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the record	d 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 led.
Dated	March 19 2022
	Alaria
	Signature of a member or authorized representative of a member  Ruth S. Garcia
	MUTH P. GURGO

Filing Fee: \$25.00

Typed or printed name of signee