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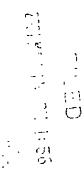
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6/21/21



COVER LETTER

SUBJECT: RELIAB	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ENRIQUE J RODRIGUEZ	Z MOREJON	
		Name of Person	
	RELIABLE TRADESMEN	N, LLC	
		Firm/Company	
	7813 CHAPERON CT		
		Address	70° <u></u>
	TAMPA, FL. 33637		
		City/State and Zip Code	
	enriquerodgz@yahoo.com		
	E-mail address: (1	to be used for future annual repo	rt notification)
For further information c	oncerning this matter, please ca	ali:	
ENRIQUE J ROI	ORIGUEZ MOREJON	at (505)	289-4554
Name o	f Person		Paytime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	<u>s:</u>	Street Addre	ess:

Registration Section
Division of Corporations

TO:

Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, Fl. 32314 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

(Name of the Limited)	Liability Company as it now appears on our records.) Florida Limited Liability Company)		•
The Articles of Organization for this Limited Liabi	ility Company were filed on 04/17/2021	and a	assigned
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company here:		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the a	bbreviation `	L.L.C."
Enter new principal offices address, if applicabl	le:		
(Principal office address MUST BE A STREET A	4DDRESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		
5 0 0	stered office address on our records, enter the nan	ne <u>of the n</u>	iew regis
agent and/or the new registered office address h	nere:		
Name of New Registered Agent:			
New Registered Office Address:	P		
	Enter Florida street address	Zip Coe	
-	, Florida	7:n C:	1
	City	гір Сос	ie -

New Registered Agent's Signature, if changing Registered Agent;

RELIABLE TRADESMEN, LLC

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 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	ENRIQUE J RODRIGUEZ MORE	7813 CHAPERON CT TAMPA, FL. 33637	■Add
			□Remove
			□Change
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ective date, if other than the d	be specific and cannot be prior	r to date of filing or more than 90 day	(optional) ys after filing.) Pursuant to 605.02
te: If the date inserted in this bloc cument's effective date on the Dep			is, this date will not be listed
	date, but not an effective t	ime, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
s filed.	2021		
s filed.		L. 22.	
ecord specifies a delayed effective so filed. May 11th			

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