LZ1000207136

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2021

RODOLFO VASQUEZ 3668 VICTORIA DRIVEWEST PALM BEACH, FL 33406

SUBJECT: ROYALTY POOLS OF PALM BEACH LLC

Ref. Number: L21000207136

We have received your document for ROYALTY POOLS OF PALM BEACH LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 221A00018278

Tekayla T Matthews OPS

www.sunbiz.org

COVER LETTER

	ision of Cor								
SUR IECT.	ROYALTY	POOLS OF PALM BEACH	l.i.C						
30 banc 1,		Name of Lim	nited Liability Con	npany					
The enclosed	i Articles of	Amendment and fee(s) are sub	omitted for filing						
Please return	all correspo	ndence concerning this matter	to the following	;;					
		RODOLFO VASQUEZ							
		· · · · · · · · · · · · · · · · · · ·	Name of P	erson					
		ROYALTY POOLS OF P.	ALM BEACH L	l.C					
			Firm/Com	pany			· · · · · · · · · · · · · · · · · · ·		
		3668 VICTORIA DRIVE							
			Addres	ŝ	· · · · · · · · · · · · · · · · · · ·				
	WEST PALM BEACH FLORIDA 33406								
			City/State and	Zip Code	e		 		
		JBBECERRA@LIVE.COM							
			to be used for futu	ire annua	il report notifica	ation)			
For further in	nformation c	oncerning this matter, please of	all:						
RODOLFO	VASQUEZ		561	42	20-7376				
	Nume o	f Person	Area (Code	Daytime T	elepho	one Number		
Enclosed is a	check for th	ne following amount:							
≘ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fi Certified (additional	Сору			\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	iling Addres	 -			Address:	an.			
	gistration S vision of C	orporations		Registration Section Division of Corporations					
P.C	D. Box 632	7		The Centre of Tallahassee					
Tal	lahassee, l	FL 32314	2415 N. Monroe Street, Suite 810						

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF THE RESERVED TO THE PROPERTY OF THE PROPE

ROYALTY POOLS OF PALM BEACH LLC

21 SE? 15 PM12: 28

(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 05/03/2021 ___ and assigned Florida document number $\frac{1.21000207136}{1.21000207136}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 City

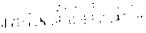
New Registered Agent's Signature, if changing Registered Agent:

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 = MAMBR =	Manager Authorized Member	Address 21 SEF 15 PH 12: 28 Type of Action 3668 VICTORIA DRIVEWEST PALM REACH FL 3					
<u>Title</u>	<u>Name</u>	Address 21 SEP 15 PH12: 28	Type of Action				
P	RODOLFO VASQUEZ	3668 VICTORIA DRIVEWEST PALM BEACH, FL	_				
			_ ■ Remove				
MGR ———	RODOLFO VASQUEZ	3668 VICTORIA DRIVEWEST PALM BEACH, FL.	3 _ ≡ Add				
			_ □Remove				
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If amending a	iny other information, enter change(s) here: (Attach addition Moherts, if hecessary) 28
	
	
Note: If the da	, if other than the date of filing:
e record specific rd is filed,	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after the
Dated	2021
	Signature of a member or authorized representative of a member
ROI	DOLFO VASQUEZ
	Typed or printed name of signee

ı

Filing Fee: \$25.00