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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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2022 APR 18 PM 4: 58

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COVER LETTER

C7			
SUBJECT:	ADH OF	SWFL, LLC	
			
The enclosed Articles of a	Amendment and fee(s) are subt	mitted for filing.	
Please return all correspoi	adence concerning this matter (to the following:	
,	•	-	
		ashon Murph	
Rashon Murch at (239) 940 - 7696 Name of Person at (239) Daytime Telephone Number Enclosed is a check for the following amount: Exception Filing Fee Search Certificate of Status Certificate of Status Certificate of Status & Certificate of S			
	1664 1	Heiman Avenue Address	
ADH OF SWFL, LLC Fitm/Company Ilaby Herman Avenue Address For t Myers, FL 33905 City/State and Zip Code Murphboyy@ gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:			
	Murphboy. E-mail address: (1	o be used for future annual report not	fication)
For further information co	oncerning this matter, please ca	itl:	
Rasho~	Person	at (<u>a39</u>) <u>9</u> Area Code Daytim	40 - 7696 e Telephone Number
Enclosed is a check for th	e following amount:		
♥ \$25,00 Filing Fee	-	Certified Copy	Certificate of Status & Certified Copy
			ction
Division of Co	orporations	Division of Cor	
P.O. Box 632	7	The Centre of T	l'allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



May 31, 2022

RASHON MURPH 1664 HEIMAN AVENUE FORT MYERS, FL 33905

SUBJECT: RDH OF SWFL, LLC Ref. Number: L21000262832

We have received your document for RDH OF SWFL, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is M19000007226.

Please check the type of action for your manager. M1900007226

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.

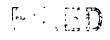
Claretha Golden Regulatory Specialist II

www.sunbiz.org

Letter Number: 722A00012234

Division of Corporations P.O. ROY 6397 Tallahassaa Florida 3931

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



2022 APR 18 PM 4:58

RDH OF SWFL	,
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records. TALL SEFE
The Articles of Organization for this Limited Liability Compar Florida document number <u>L21000262832</u> .	ny were filed on 06/07/2001 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li-	ability company here:
RDH Management. The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1664 Heiman Avenue
(Principal office address MUST BE A STREET ADDRESS)	Fact myeis, FL 33905
Enter new mailing address, if applicable:	1664 Heiman Avenue
(Mailing address MAY BE A POST OFFICE BOX)	-Fortingers, FL 33905
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	NIA
New Registered Office Address:	Enter Florida street address
	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>(t:</u>

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.

NIA

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mGR	Bashon Murch	1664 Heiman Avenue Flyer	<u>%_FC_</u> □Add 3505
			□Remove
			🖸 Change
			□Add
			□Remove
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ote:	ive date, if other than the date of filing:
recor Lis fi	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.
ated	04/15/2022
	R. Ish
	Signature of a member or authorized representative of a member
	Signature of a memory of authorized representative of a memor

Filing Fee: \$25.00