Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : I20160000067 Phone : (407)370-3686 Fax Number : (407)370-3120

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: CAROL @ LARSONACC. COM

1021 DEC 22 PM 4: 55 ATTABASSEL CONTR

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BSR3 INVESTMENTS GROUP LLC

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TALLAHASSEE, FLORIDA

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## **COVER LETTER**

	tration Sec ion of Corp			
eun lezer.	BSR3 INV	ESTMENTS GROUP LLC		
SUBJECT: _	<u> </u>	Name of Lim	ited Liability Company	<del></del>
The enclosed i	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ll correspor	ndence concerning this matter	to the following:	
		CAROLINE LARSON		
			Name of Person	
		LARSON ACCOUNTIN	IG GROUP	
			Firm/Company	<del></del>
		7901 KINGSPOINTE PA	ARKWAY, SUITE 17	
		· · · · · · · · · · · · · · · · · · ·	Address	
		ORLANDO, FL 32819		
			City/State and Zip Code	
		CAROL@LARSONACC		
		E-mail address: (	to be used for future annual report n	otification)
For further inf	ormation co	oncerning this matter, please ca	all:	
JEAN FRAN	KLIN SIMS	SEN	407 370-3686	•
	Name of	Person		ime Telephone Number
Enclosed is a	check for the	c following amount:		
□ \$25.00 Fi	ling Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ing Address istration S		Street Address: Registration	
•		orporations	Division of C	orporations
	Box 632		The Centre o	f Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BSR3 INVESTMENTS GROUP	LLC				
(Name of the Limite	d Liability Compan A Florida Limited Li	y as it now appears on our records.) ability Company)			
The Articles of Organization for this Limited Lie Florida document number L21000309126	ability Company v	were filed on07/06/2021	and ass	igned	
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabil	lity company here:			
R3J GROUP. LLC					
The new name must be distinguishable and contain the we	ords "Limited Liabili	ty Company," the designation "LLC" or the	e abbreviation "L.	L.C."	_
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  KISSIMMEE, FL 34741		2107 CLAY STREET			
		KISSIMMEE, FL 34741			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE I	<u>80X)</u>	2107 CLAY STREET KISSIMMEE, FL 34741			<b>-</b> -
B. If amending the registered agent and/or reagent and/or the new registered office address  Name of New Registered Agent:	s he <u>re</u> :	ddress on our records, enter the r	name of the new	v regist	tered
	7901 KINGSPOINTE PARKWAY, SUITE 17		7.55	22	17
New Registered Office Address:	<del> </del>	Emer Florida street address	E.P.	PH	70
	ORLANDO	, Florida	32819		_
		Ciņ.	Zip Eode	بن	

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. Thereby confirm that the limited liability company has been notified in writing of this change.

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

If Changing Registered Agent, Signature of New Registered Agent

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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
AMBR	RAFAEL TELES RAMOS	4661 CASON COVE DR - APT 1914	□Add
		ORLANDO, FL 32811	≣ Remove
AMBR JEA	JEAN FRANKLIN SIMSEN	2755 MONTICELLO WAY	□Add
		KISSIMMEE, FL 34741	□Remove
		<u> </u>	
AMBR JANAINA BODANESI S SI	JANAINA BODANESI S SIMSEN	2755 MONTICELLO WAY	<b>=</b> Add
		KISSIMMEE, FL 34741	Remove
			Change
MGR MONICA PALHETA	MONICA PALHETA	2107 CLAY STREET	<b>\(\sum_\)</b> Add
		KISSIMMEE, FL 34741	□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			T Change

Signature of a member or authorized representative of a member

Typed or printed name of signee

JEAN FRANKLIN SIMSEN

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