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## **COVER LETTER**

TO: 1	Registration Se Division of Co	ection rporations		
SUBJEC	Richy Rikt	ıras, LLC		
SOBJEC	1	Name of Lin	nited Liability Company	
The enclo	seed Articles of	Amendment and fee(s) are sul	havited for fills	
		ondence concerning this matter	•	
		Ricardo Sarquis Vanegas		
			Name of Person	<del></del>
		Richy Rikuras, LLC		
			Firm/Company	
		5224 NE 3rd Ct Apt. 02		
			Address	<del></del> -
		Miami, FL 33137		
			City/State and Zip Code	
		ricardojesussarquis@gmail.		
			to be used for future annual report no	tification)
For further	r information c	oncerning this matter, please c	all:	
Ricardo S	arquis Vanegas	S	786 762-8201	
	Name o	f Person		ne Telephone Number
Enclosed i	s a check for th	ne following amount:		
	0 Fiting Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P	Lailing Addres Registration S Division of C C.O. Box 632 Callahassee, F	Section orporations 7	Street Address: Registration Se Division of Co The Centre of 2415 N. Monre	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Richy Rikuras, LLC (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 \_\_\_\_\_\_ and assigned Florida document number L21000314319 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Richy Rikuras, LLC 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 \_\_\_\_\_, Florida \_\_\_\_ 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 =	Manager	
AMBR =	Authorized	Member

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			[]Remove
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