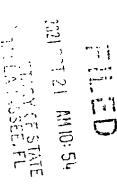
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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 10/21/21

NAME: RSS FLORIDA BROKER, LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section Division of Corporations					
OTHER TO CAR.	RIDA BROKER, LLC				
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matte	τ to the following:			
	Max Kelner				
		Name of Person			
	Omni New York LLC				
		Firm/Company			
	909 Third Ave., 21st Floo	г			
		Address			
	New York, NY 10022				
		City/State and Zip Code			
	mkelner@onylic.com				
		(to be used for future annual report notifica	tion)		
For further information of	concerning this matter, please o	all:			
Max Kelner		646 352-3790			
Name o	f Person	at ()	elephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing 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)		
Mailing Address		Street Address:			
Registration Section Division of Corporations		Registration Section			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RRS FLORIDA BROKER, LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company v	vere filed on 9/27/2021 and assigned
Florida document number L21000424288	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ty company here:
The new name must be distinguishable and contain the words "Limited Liabilit	Company," the designation "LLC" or the abbreviation "L.L.C."
0	2
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	m o
	7至 25
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office ad	dress on our records, enter the name of the new register
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

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:

٠...

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Charles D. Medalie	7811 Ashley Circle	≅Add
		Bradenton, Florida 34201	□Remove
			Change
			🗆 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			
			DAdd
			□Remove
		4	□Change
			□ A ₫d
			□ Remove
			□ Change

Page 2 of 3

amending any other informat	ion, enter change(s) here: (Attach addition	al sheels, if necessary.)
		
	-	
		
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<u> </u>		<u> </u>
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fective date, if other than the one of the date is listed, the date must tee: If the date inserted in this blocument's effective date on the De	be specific and cannot be prior to date of filing or more ck does not meet the applicable statutory filing r	(optional) than 90 days after filing.) Pursuant to 605.0207 equirements, this date will not be listed as
record specifies a delayed The 90th day after the reco	effective date, but not an effective tin rd is filed.	ne, at 12:01 a.m. on the earlier o
September 29	2021	
	7/1/1/	
	Signature of a member or authorized representative of	a member
Max Kelner	<i>U</i>	
May Venier	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00