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## **COVER LETTER**

TO:	Registration Sec Division of Corp					
entorea		FAMILY BUSINESS LLC		·		
SUBJE	C1:	Name of Lim	ited Liability Company			
		Amendment and fee(s) are subndence concerning this matter				
		Roberto Rodriguez				
			Name of Person			
		RM & MR FAMILY BUS	INESS LLC			
		Firm/Company  3384 Rogero Rd  Address  Jacksonville F1, 32277  City/State and Zip Code				
		Mirelys67@gmail.com  E-mail address: (to be used for future annual report notification)				
For furtl	her information co	oncerning this matter, please co		•		
Mirelys	Rodriguez Salaba	erria		3-2116		
	Name of	Person	at ()	Daytime Teleph	one Number	
Enclosed	d is a check for the	e following amount:				
□ \$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		\$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address		Stroot A	ddraec.		

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RM & MR FAMILY BUSINESS LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records ted Liability Company)	.)
The Articles of Organization for this Limited Liability Comp. Florida document number $\frac{1.21000484951}{1.21000484951}$ .	any were filed on 11/10/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	2	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
Francis address MAT DE AT OST OF FICE DOAY		ابرا اس
B. If amending the registered agent and/or registered offi	ce address on our records, enter t	he name of the new registe
igent and/or the new registered office address here:	ect data cas vii var recortas, <u>cincre</u>	or sta
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	
	, Flor	rida Ziv 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mirelys Rodriguez Salabarria	3384 Rogero Rd Jacksonville F1, 32277	<b>=</b> Add
			□Remove
			□Change
AR	Milan Rodriguez	7504 Sandhurst Rd S. Jacksonville, FL, 32277	□Add
			■Remove
			☐ Change
AR	Veronica Scherrer	7504 Sandhurst Rd S. Jacksonville, FL, 32277	□Add
			■Remove
	·		□Add
			🗆 Remove
			□Add
			□Remove
			□Change
			🗆 Remove
			□Change

). 11 ann	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff Note:	ve date, if other than the date of filing:  (optional)  cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the recor	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 ed.
Dated	01/15 2022
	East 1
	Signature of a member or authorized representative of a member
	Roberto Rodriguez
	Typed or printed name of signee