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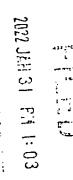
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Office Use Only



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2-8-22 TAS



### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Readen 4 Levites UC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Ana Palsado Name of Person	
Firm/Company	
1617 Sw 139th Sve	
Miami F 33177  City/State and Zip Code	
Solgado Ano 70 @ Vahoo Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	1.15 1.15 1.15
And Salgado at 35 Area Code Daytime Telephone Number	· · · · · · · · · · · · · · · · ·
Enclosed is a check for the following amount:	PH 1: 03
(additional copy is enclosed) Certified	ling Fee. te of Status &

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

RC Open Hear	en 4 levites 1	LC 38 7
(Name of the Limited	Liability Company as it now appears on or Florida Limited Liability Company)	ir records.)
The Articles of Organization for this Limited Liab	1	9/21 and assigned
This amendment is submitted to amend the follow		
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company." the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	OX)	
B. If amending the registered agent and/or reg agent and/or the new registered office address		s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
		, Florida
	City	Zin 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 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
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Myl	Reyes Rios	16117 Sw 139th Are	\$\f\Add
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If an effect Note: If	tive date is liste the date inse		ecific and cannoes not meet t	ot be prior to date of t he applicable statut	iling or more than 90	(optional) days after filing.) Pursuant to nents, this date will not be	
e record s rd is filed		layed effective date	e, but not an ei	ffective time, at 12:	01 a.m. on the ear	lier of: (b) The 90th day	after the
Dated	Jon ?	21	15	ozz .	<u> </u>		_
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