122000088709

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COVER LETTER

TO: Registration Se Division of Cor		•		
SUBJECT: R+	-R Legacy 1	nvestments ited Liability Company	LLC	
	○ Nam ∉ of Lim	ited Liability Company	,	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
r				
	Rebe	ecca Wells Name of Person		
	_ R+R Lea	JACY HVE STM	ients, LLC	
	4705 Sp	ring Creek Ro	<u>l</u> .	
	Arlington	TX 760)17	
	Yebecca We E-mail address: (City/State and Zip Code CITY/State and Zip Code CITY/State and Zip Code CITY/State and Zip Code Code to be used for future annual report no	2 amail. Com	
For further information e	oncerning this matter, please ca	all:	202 ≎ ≘	
0:	1 : /	417 411	e-5878 The DUN 12 me Telephone Number	
Keberra W	e / -S	at (<u>817</u>) <u>844</u> Area Code Dayti	p - 5 8 / S =	
Name o	reison	Area Code Dayii	the relephone Number]
				•
Enclosed is a check for the	ne following amount:			- Principle
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address		Street Address:	aatian	
Registration S Division of C		Registration S Division of Co		
P.O. Box 632	•	The Centre of	•	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



Division of Corpora

April 16, 2024

REBECCA WELLS R & R LEGACY INVESTMENTS, LLC 4705 SPRING CREEK RD ARLINGTON, TX 76017

SUBJECT: R & R LEGACY INVESTMENTS, LLC

Ref. Number: L22000088709

We have received your document for R & R LEGACY INVESTMENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

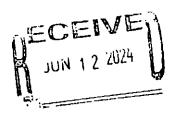
The form you submitted is for a Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Operations Manager A

Letter Number: 224A00008256



www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION • OF

The Articles of Organization for this Limited Liability Company were filed on 1-21-22 Florida document number <u>LZ20000</u> & & 709 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LFC Group, LLC
name must be distinguishable and contain the words "Limited Liability 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) 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: Julie A. Gould Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

____, Florida

or removed	from our records:		
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Rhett S. Wells	2349 Constitution Blud.	□Add
		Sarasota, FL 34231	
			□Change
			□Add
			Remove
			□Change
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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an effect tote: If	tive date, if other than the date of filing:	
record : Lis filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afted.	er the
ated	Klell	
	Signature of a member or authorized representative of a member	
	Rebecca L. Well-S Typed or printed name of signee	