L22 000 098 190

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

A. RIVERS
DEC 1 5 2022



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COVER LETTER

TO:

FO: Registration Se Division of Cor			
SUBJECT: Ricc G	Realty LLC		
SUBJECT:	<u> </u>	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Riccardo Gonz	ralez	
	1110001100 00112	Name of Person	
		Firm/Company	
	9866 sw 222nd	l ter	
		Address	
	Miami, Fl 331	90	
		City/State and Zip Code	
		alez@gmail.com to be used for future annual report noti	lication)
or further information e	oncerning this matter, please c	all:	
Riccardo Gon:	zalez	at (305) 924-362	7
	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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)
Matthew Address		Samue Adding	
Mailing Addres Registration S	Section	<u>Street Address:</u> Registration Se	
Division of Corporations		Division of Corporations The Centre of Tallahassee	
P.O. Box 632 Tallahassee, I			ananassee e Street, Suite 810
		Tallahassee, FL	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ricc G Realty LLC

(Name of the Limited Liability Company as it now appears on our records.)

	o macing company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on 02/24/22	and assigned
Florida document number L22000098190		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The G Company LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility 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)		
ngent and/or the new registered office address here: Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	
	Fic	orida Zip Cod-2
	City	Zip Code?
New Registered Agent's Signature, if changing Registered Agen	<u>st:</u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
hereby accept the appointment as registered agent and approvisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent appeing filed to merely reflect a change in the registered office company has been notified in writing of this change.	te performance of my duties, ar s provided for in Chapter 605	nd Lam familfar with and ! F.S. Or. if this decrement is
If Ct	nanging Registered Agent, Signature o	f 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>	Name	<u>Address</u>	Type of Action
			🗆 Add
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		☐ Change	
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(If an eff Note:	ive date, if other than the date of filing:
he recor ord is fi	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 led.
Dated	August 19 Rinds Solver of a member or authorized representative of a member
	(Rudo Sa)

Filing Fee: \$25.00