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R. HUNT 63/06/23

## **COVER LETTER**

	Cegistration Se Division of Cor						
SUBJEC.	RMC 200 &	2 48, LLC					
SOBJEC	1 ·	Name of Lim	nited Liability Company				
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please reti	urn all correspo	ndence concerning this matter	to the following:				
		Kim Johnson					
			Name of Person	<del></del>			
		RMC Property Group			1	,	
		<del></del>	Firm/Company		, . 	a La	
		8902 N. Dale Mabry Hwy	., #200		ا: ن امر ــــــــــــــــــــــــــــــــــــ	:. :) !	,
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		Tampa, FL 33614		(+ (+ (1)		PM 1: 06	1
			City/State and Zip Code	<u></u> :	트 :	;. ⊃	
		kjohnson@rmepg.com	to be used for future annual report noti	fication)	L1 6	•	
For furthe	r information c	oncerning this matter, please o	•	neation			
Kim Johr			813 712-3061				
	Name o	f Person	at () Area Code Daytim	e Telephone Number			
Enclosed	is a check for th	ne following amount:					
■ \$25.0	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filin Certificate of Certified Co (additional cop	of Status . opy		
Ī	Mailing Addres Registration S	Section	<u>Street Address:</u> Registration Se				
	Division of C P.O. Box 632		Division of Cor The Centre of 1				
	Fallahassee, I			e Street, Suite 810	)		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RMC 200 & 48, LLC			
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) Limited Liability Company)		
The Articles of Organization for this Limited Liability Company were filed on 03/02/2022  Florida document number L22000113580			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
RMC 60 LGR, LLC			
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRE	F20)	- 10 1 seem	
17 meipus office unavess Proof BE /1 STREET /1001C	(2) S	C 70 (11	
Enter new mailing address, if applicable:	ر. ني ټ	0 <b>6</b>	
(Mailing address MAY BE A POST OFFICE BOX)			
Printing was Classification of the Bong			
B. If amending the registered agent and/or registered (	office address on our records, enter the name	of the new regis	
agent and/or the new registered office address here:	one address on our records, enter the name	Or the Heavilland	
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 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	Address	Type of Action
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			□Remove
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n effective date is listed, the date must be specific anter:  If the date inserted in this block does not	meet the applicable staru	filing or more than 90 days aff itory filing requirements, t	er filing.) P nis date wi	ursuant to Il not be	605.02 listed
cument's effective date on the Department of	State's records.				
ecord specifies a delayed effective date, but no	ot an effective time at 12	'Al a m on the earlier of	(h) The C	Oth day	after th
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Filing Fee: \$25.00