8/16/24, 11:31 AM

Division of Corporations



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Account Number : I20060000012 Phone : (305)826-5886 Fax Number : (305)722-0535

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RICOHPY LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Compa Florida Limited	ny as it naw appears on our records.) Lizbility Company)		_	
The Articles of Organization for this Limited Liab Florida document number L22000251437	oility Company	were filed on <u>06/01/2022</u>	and	d assig	ned
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	he limited liab	ility company here:			
The new name must be distinguishable and contain the word	ds "Limited Liabii	ity Company," the designation "LLC" or	the abbreviatio	n *L.L.(<u></u>
Enter new principal offices address, if applicab	ole;	11394 W 34 WAY HIALEAH , FI	L 33018		<u>-</u>
(Principal office address MUST BE A STREET	ADDRESS)				<u> </u>
Enter new mailing address, if applicable:		11394 W 34 WAY HIALEAH , FI	L 33018		
(Mailing address MAY BE A POST OFFICE BE	<u>0x0</u>				
B. If amending the registered agent and/or reg agent and/or the new registered office address Name of New Registered Agent:		address on our records, <u>enter the</u>	name of the	2024	registered
	11394 W 34 W	AY	1.5 mm	UG	
New Registered Office Address:		Enter Florida street address		6	
	MIAMI	, Floric	da 33018	PH	
		Cliv	−Zip (nde	
New Registered Agent's Signature, if changing Re	gistered Agent;			42	

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>	Name	Address	Type of Action
∧MBR	MARCOS G CASTILLO	11394 W 34 WAY HIALEAH FL, 33018	□Add
			□Remove
			■ Change
			□ Add
			□Remove
			□ Change
			□Remove
			Change
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<u>-</u>	
ite: If the date insi	ther than the date of filing:
ecord specifies a de is filed.	elayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
07/24 ted	2024
_	-AAA)
	Signature of a member or authorized representative of a member
	MARIOX CASTILLO