

L22000267724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

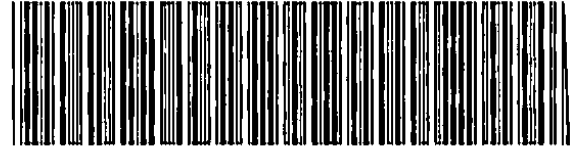
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF COURT
JULY 11, 2022

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Royal Cut Supply LLC

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:

Pablo D. Saturnino

Name of Person

Royal Cut Supply LLC

Firm/Company

1861 SW 74 Ave Rd

Address

Miami, FL 33155

City/State and Zip Code

royalcutsupply@outlook.com

E-mail address: (to be used for future annual report notification)

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RECEIVED
TALLAHASSEE

For further information concerning this matter, please call:

Pablo D. Saturnino

305

965-2863

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

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**

Royal Cut Supply LLC

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

The Articles of Organization for this Limited Liability Company were filed on June 13, 2022 and assigned
Florida document number L22000267724.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new 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)

1861 SW 74 Ave Rd

Miami, FL 33155

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1861 SW 74 Ave Rd

Miami, FL 33155

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:

Name of New Registered Agent:

Pablo D. Saturnino

New Registered Office Address:

1861 SW 74 Ave Rd

Enter Florida street address

Miami

City

Florida 33155

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 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 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 or removed from our records:

MGR = Manager

AMBR = Authorized Member

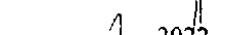
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Act</u>
MGR	Pablo Saturnion	9340 W Flagler St	<input type="checkbox"/> Add
		Miami, FL 33174	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Pablo D. Saturnino	1861 SW 74 Ave Rd	<input checked="" type="checkbox"/> Add
		Miami, FL 33155	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11-28-2022 BY 60322 UCBAW

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If the record 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 record is filed.

November 15, 2022



Signature of a member or authorized representative of a member

Pablo D. Saturnino

Typed or printed name of signee

Filing Fee: \$25.00