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SECRETARY OF STATE
TALLAHASSEE, FL

ATT TO SERVICE OF THE PERSON O

COVER LETTER

TO: Registration Section Division of Corpo	on Trations			,	
SUBJECT: <u>P</u> Aic	Name of Limit	SSC 14ATT	<u></u>		
The enclosed Articles of Ar	nendment and fec(s) are subn	nitted for filing.			
Please return all correspond	lence concerning this matter t	o the following:			
	RAUBER	Name of Person EASSOCIATE Firm/Company	<u> </u>	2022 SEP -8 PM 3: 43 SECRETARY OF STATE TALLAHASSEE, FL	
	1609 MOU	NT CROGHAN Address	TRAL	تَ ﷺ خ	
	Paymon Junail address: (1	City/State and Zip Code C Pour Code to be used for future annual report notifi	2162 <u>Smai</u>	l.com	$ \uparrow $
For further information cor	icerning this matter, please ca	ull:			
GARURA Name of I	AUBER Person	at (<u>585-208</u> - Area Code Daytime	Telephone Numbe	5	
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)	Certified	ate of Status &	
Mailian Address		Street <u>Address:</u>			

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

RAUBER É F	1330CIATES, LLC
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
(, , , , , , , , , , , , , , , , , , ,	2 20 20-0
The Articles of Organization for this Limited Liability C	ompany were filed on and assigned
Florida document number <u>L/2003 79</u>	3.70
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ted liability company here:
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the abbreviates "L.L.C."
•	TAR TYPE
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	(A Florida Limited Liability Company) In for this Limited Liability Company were filed on Society and assigned so
	SG P
	ကြဟု ယ
Enter new mailing address, if applicable:	三
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered	l office address on our records, <u>enter the name of the new registered</u>
agent and/or the new registered office address here:	
Name of New Registered Agent:	
Name Daniel of State Addresses	
New Registered Office Address:	Enter Florida street address
	City Zip Code
New Registered Agent's Signature, if changing Registered	d 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address T	vpe of Action
MGR	GARYPAUREZ	1607 MOUNT CROSHA THE VILLAGES, FL	ZAdd COQ
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Effective date, if other than the date of filing an effective date is listed, the date must be specific and Note: If the date inserted in this block does not a document's effective date on the Department of S	d cannot be prior neet the applic	to date of filing able statutory	or more than 90 days	optional) after filing.) Pur s. this date will	rsuant to not be	605.0207 listed as
e record specifies a delayed effective date, but not d is filed.	t an effective ti	ime, at 12:01 a	.m. on the earlier o	of: (b) The 90	th day	after the
Dated BEPTEMBERG	. 202	2				
Dated 3EPTEMBE26 Signature of a	nember or auth	orized representa	tive of a member			_