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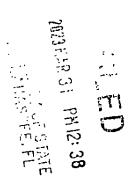
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R. HUNT 03/3/23

## COVER LETTER

ΓΟ: Registration Sec Division of Corp			
SUBJECT: 130Czoc	Dispatch Se Name of Limit	s VIICOS : LIC ed Liability Company	<del></del>
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspor	idence concerning this matter to	o the following:	
	Valodia Ga	Name of Person	
	Rogar Dis	PCITCH SPRYICE Firm/Company	
	32755.)01	+N YOUNG PX	Wy 5+ 206  6 U SEE FAI  Gation)
		City/State and Zip Code	31 PM 12: 38 Sication) STATE  Sication State
	Prossenchor E-mail address: (1	to be used for future annual report notifi	ication) 7 2 38
For further information co	oncerning this matter, please ca	all:	
1/010 d. G. G. Name o	1 CV CA CA f Person	at (407) 837 (Area Code Daytime	9956 Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration Division of C	Section	Street Address: Registration Sec Division of Cor	
P.O. Box 632	27	The Centre of T	allahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROGAT DIS PALCH Ser (Name of the Limited Liability Compan (A Florida Limited L.	y as it now appears on our records.) (ability Company)
The Articles of Organization for this Limited Liability Company	were filed on OC + Ober 26, 202 and assumed
The Articles of Organization for this Limited Liability Company (Florida document number <u>L_22_000_4366.54</u>	: 3 <b>9</b>
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Rogar Cleaning Service The new name must be distinguishable and contain the words "Limited Liability Contains the words" "Limited Liability Contains the words "Limited Liability Contains the words "Limited Liability Contains the words" "Limited Liability Contains the words "Limited Liability Contains the words" "Limited Liability Contains the words "Limited Liability Contains the words" "Limited Liability Contains the words" "Limited Liability Contains the words "Limited Liability Contains the words" "Limited Liability Contains the words "Liability Contains the words" "Liability Contains the words "Liability Contains the words" "Liability Contains the words "Liability Contains the words" "Liability Contains the words "Liability Co	es, LLC
The new name must be distinguishable and contain the words "Limited Liabih	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3275 S 70 HN YOUNG
(Principal office address MUST BE A STREET ADDRESS)	RKMY Suite 206
	Vissivimer, EL 34746
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Possana Gancie Zoit e Gmari com
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	na M.R.Coimbra Garcia
New Registered Office Address: 3275	5. JOHN YOUNG 5+ 206 Enter Florida street address

## 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 Changing Registered Agent, Signature of New Registered Agent

KISSIMMEE Florida 34746
City Zip Code

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

Title	<u>Name</u>	Address	Type of Action
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MGR	VALODIAGARCIA	3275 SJOHN YOUNG PK	MYBAdd 5+ 206
			Remove
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	(optional)	ant to 605.0207
(If an effective date is listed, the date must be specific and ca	annot be prior to date of filing or more than 90 days after filing.) Pursua eet the applicable statutory filing requirements, this date will no	ot be listed as
(If an effective date is listed, the date must be specific and ca Note: If the date inserted in this block does not med document's effective date on the Department of State the record specifies a delayed effective date, but not an	annot be prior to date of filing or more than 90 days after filing.) Pursua eet the applicable statutory filing requirements, this date will no	ot be listed as
(If an effective date is listed, the date must be specific and ca Note: If the date inserted in this block does not mee document's effective date on the Department of State the record specifies a delayed effective date, but not an cord is filed.  Dated 03 - 27 - 2023	cannot be prior to date of filing or more than 90 days after filing.) Pursua tet the applicable statutory filing requirements, this date will not ate's records.  In effective time, at 12:01 a.m. on the earlier of: (b) The 90th	ot be listed as
Note: If the date inserted in this block does not mee document's effective date on the Department of State the record specifies a delayed effective date, but not an cord is filed.  Dated 03 - 27 - 2023.	cannot be prior to date of filing or more than 90 days after filing.) Pursuate the applicable statutory filing requirements, this date will not ate's records.  In effective time, at 12:01 a.m. on the earlier of: (b) The 90th	ot be listed as

Filing Fee: \$25.00