

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**L22000431776**

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(((H22000398903 3)))



H220003989033ABC3

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CYAN CONSULTANTS INC.  
Account Number : I20180000074  
Phone : (321)710-2030  
Fax Number : (407)650-3216

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: documents@cyancinc.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ROGOGUE PARTNERS LLC**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

SECRETARY OF STATE  
TALLAHASSEE, FL

2022 NOV 28 AM 9:28

FILED

2022 Nov 28 10:04

C. BRUMBLEY  
NOV 29 2022

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Corporate Filing Menu

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**COVER LETTER**

**TO: Registration Section**  
**Division of Corporations**

**SUBJECT: ROGOUE PARTNERS 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:

GONZALEZ GUERRA, VIRGINIA

\_\_\_\_\_  
 Name of Person

ROGOUE PARTNERS LLC

\_\_\_\_\_  
 Firm/Company

111 E MONUMENT AVE SUITE 401-12

\_\_\_\_\_  
 Address

KISSIMMEE, FL 34741

\_\_\_\_\_  
 City/State and Zip Code

documents@cyancinc.com

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

For further information concerning this matter, please call:

GONZALEZ GUERRA, VIRGINIA

321 710-2030  
 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

ROGOUE PARTNERS 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 10/21/2022Florida document number L22000454776

FILED  
 2022 NOV 28 AM 9:28  
 SECRETARY OF STATE  
 TALLAHASSEE, FL

This amendment is submitted to amend the following:

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

NO CHANGES

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:

NO CHANGES

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NO CHANGES

(Mailing address MAY BE A POST OFFICE BOX)**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:

NO CHANGES

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 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

Title	Name	Address	Type of Action
MGR	VIRGINIA GONZALEZ GUERRA	111 E MONUMENT AVE.	<input type="checkbox"/> Add
		SUTTE 401-12	<input type="checkbox"/> Remove
		KISSIMMEE, FL 34741	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated NOVEMBER 21st 2022

*[Handwritten signature]*

Signature of a member or authorized representative of a member

VIRGINIA GONZALEZ GUERRA

Typed or printed name of signee

**Filing Fee: \$25.00**