## L22000476678

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A. RAMSEY NOV 09 2022

## COVER LETTER

TO: Registration Sec Division of Corp		•			
. (	Coletribe,	لار د			
SUBJECT:	Name of Limi	ted Liability Company	<del>.</del>		
The enclosed Articles of A	Amendment and fee(s) are subr	mitted for filing.			
Please return all correspor	ndence concerning this matter t	to the following:			
		John Stout	DR_ \		
		Name of Person			
		Firm/Company	<del>.</del>		
	× 1998	Golden Engle (	D.V.40		
	+ Tailahas	City/State and Zip Code	1		
	( A Company of the Co	City/State and Zip Code  City/State and Zip Code  Dage bage  be used for future annual report notifi	Dales @ Jahoo, co.		
For further information co	oncerning this matter, please ca	all:	_		
* John M.S.	tow, sa	at () Area Code Daytime	3-3403		
Name of	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for th	ne following amount:				
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres		Street Address:	.·		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 NOV -9 PM 12 58

x Roletrib	e L	LL		5 PAIZ 58	
( <u>Name of the Limite</u> (.	d Liability Comp A Florida Limited	pany as it now appears I Liability Company)	s on our records.)	· · · · · · · · · · · · · · · · · · ·	
The Articles of Organization for this Limited Lia Florida document number \( \times \L 22000 \)			11/06/	2022 and assigned	
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of Rolltibe LLC The new name must be distinguishable and contain the wo				or the abbreviation "L.L.C."	
Enter new principal offices address, if applica					
(Principal office address MUST BE A STREET	ADDRESS)		<b>-</b>		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE B	<u>80X)</u>		<del></del>		
B. If amending the registered agent and/or reagent and/or the new registered office address		e address on our re	ecords, <u>enter th</u>	ne name of the new registered	
Name of New Registered Agent:					
New Registered Office Address:		Enter Flori	ida 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 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 Address Type of Action Name \_\_\_\_\_ □Change \_\_\_\_\_ □Remove \_\_\_\_\_\_ Change \_\_\_\_\_ □Remove \_\_\_\_\_\_ □Remove \_\_\_\_\_ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. Signature of a member or authorized representative of a member

Filing Fee: \$25.00