## Laa 0005a8436

(Requestor's Name)
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
operational desiration is a fining officer.





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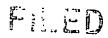
## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Rooster RE Group, 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:
Charles Christopher Allen Name of Person
Poortet Goup Firm/Company
1067 422 Aug NE Address
City/State and Zip Godd
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$ \$\times \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$\$ \$\times \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$\$\$\$ \$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



Rooster RE	Corous LLC	ZUZJEBIO AMIO: I
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	TALL/ nASSEE, FL
The Articles of Organization for this Limited Liability Company	were filed on Decamber 19 8	and assigned
Florida document number <u>L22 Coc 528436</u>	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)	··	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
manny address man be at logi of life bony		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	_ <del></del>	<del> </del>
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
New Registered Agent's Signature, if changing Registered Agent:	City	гір Сосів
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I provided for in Chapter 605, F.S	am familiar with and C. Or, if this document is

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

<u>Title</u>	Name	Address	Type of Action
MBR	Charles Obristapher Allen	last 42nd Ave DE	/ŠiĄdd
	,	St. Pedersburg, FL 33702	□Remove
<del> </del>			□ Add
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. GIIILI	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an offo lote:	ve date, if other than the date of filing:
record is file	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 ed.
ated 1	Floring 7 2023.
	Signature of a member or authorized representative of a member
	Undes Christopher Allen Typed or printed name of signee

Filing Fee: \$25.00