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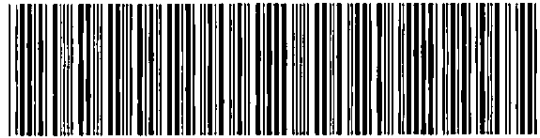
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RJ&R MULTISERVICES 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

ROBINSON J RAMIREZ CANO

Name of Person

*Robinson J Ramirez Cano*

Firm/Company

1787 BUCKEYE RD

Address

DAVENPOR, FL 33837

City/State and Zip Code

RJRMULTISERVICESLLC@GMAIL.COM

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

For further information concerning this matter, please call:

ROBINSON RAMIREZ CANO

786

6551648

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  
RJ&R MULTISERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.) (A  
Florida Limited Liability Company)

RJ&R MultiServices, LLC

The Article's of Organization for this Limited Liability Company were filed on 12/27/2022 and assigned  
Florida document number L23000000515

This amendment is submitted to amend the following:

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

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:

1787 BUCKEYE RD, DAVENPORT, FL 33837

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1787 BUCKEYE RD, DAVENPORT, FL 33837

(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:

RICARDO J MEDINA GUERRA

New Registered Office Address:

1787 BUCKEYE RD

Enter Florida street address

DAVENPORT FL

33837

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.

*Ricardo J Medina G*

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
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MGR      ROBINSON RAMIREZ CANO

☒ Add

☐ Remove

1787 BUCKEYE RD. DAVENPORT FL 33837

☒ Change

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

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Filing Fee: \$25.00