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COVER LETTER

VICIOS RC, LLC		
Name of Lim		
Name of Diff	ited Liability Company	
mendment and fee(s) are sub	mitted for filing.	
lence concerning this matter	to the following:	
BLANCA L LACAYO		
	Name of Person	
Hadas Accouting & Tax So	ervices	
	Firm/Company	· · · · · · · · · · · · · · · · · · ·
210 SW 107th AVE		
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. 32314		e Street, Suite 810
	mendment and fee(s) are subsence concerning this matter BLANCA L LACAYO Hadas Accounting & Tax Security Tax	mendment and fee(s) are submitted for filing. Idence concerning this matter to the following: BLANCA L LACAYO Name of Person Hadas Accouting & Tax Services Firm/Company 210 SW 107th AVE Address Miami, FL 33174 City/State and Zip Code hadastaxeservices@gmail.com E-mail address: (to be used for future annual report not cerning this matter, please call: at (305

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MULTISERVICIOS RC, LLC		
(Name of the Limited L (A F	iability Company as it now appears on o lorida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liabil		•
Florida document number L23000015830	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company." the designate	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A	DDRESS)	272
Enter new mailing address, if applicable:		(b
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		22
B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office address on our record ere:	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	zel 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LINDA ORE VALVERDE	22125 SW 114TH CT MIAMI FL 33170	□Add
			≅Remove
			🗆 Change
			□Add
			🗖 Remove
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	d 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
Dated	12/05
Dated	

Typed or printed name of signee

LUIS E HUAMAN MENDEZ