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COVER LETTER

SUBJECT: R & M Solutions, LLC Name of Limited Liability Company	
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: Ricardo Torres Name of Person Firm/Company 2945 Grande Oaks Way Address Fleming Island, FL 32003 City/State and Zip Code ricardotorresrivera24@gmail.com E-mail address: (to be used for future annual report notification)	
Please return all correspondence concerning this matter to the following: Ricardo Torres Name of Person Firm/Company 2945 Grande Oaks Way Address Fleming Island, FL 32003 City/State and Zip Code ricardotorresrivera24@gmail.com E-mail address: (to be used for future annual report notification)	
Ricardo Torres Name of Person Firm/Company 2945 Grande Oaks Way Address Fleming Island, FL 32003 City/State and Zip Code ricardotorresrivera24@gmail.com E-mail address: (to be used for future annual report notification)	
Firm/Company 2945 Grande Oaks Way Address Fleming Island, FL 32003 City/State and Zip Code ricardotorresrivera24@gmail.com E-mail address: (to be used for future annual report notification)	
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Fleming Island, FL 32003 City/State and Zip Code ricardotorresrivera24@gmail.com E-mail address: (to be used for future annual report notification)	
City/State and Zip Code ricardotorresrivera24@gmail.com E-mail address: (to be used for future annual report notification)	
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For further information concerning this matter, please call:	
Ricardo Torres 904 610-1851 C A C C C C C C C C C C C	, -= , -=
Name of Person at () Area Code Daytime Telephone Number Fri &	
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) 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

R & M 1 Solutions, LLC		
(Name of the Lim	ted Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited I Florida document number L23000038495	Liability Company were filed on <u>0</u>	and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company	<u>aere</u> :
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 appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	2023
		AN 30
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	<u> </u>
		1. S8 S
B. If amending the registered agent and/or agent and/or the new registered office addre	••	records, enter the name of the new registere
Name of New Registered Agent:	Ricardo Torres	
New Registered Office Address:	2945 Grande Oaks Way	
	Enter F	lorida street address
	Fleming Island	Florida ³²⁰⁰³
	Cuy	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ricardo Torres	2945 Grande Oaks Way	□Add
		Fleming Island, FL 32003	Remove
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			□Add
			□Remove
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fective date, if other than the dat n effective date is listed, the date must be so te: If the date inserted in this block of cument's effective date on the Depart	does not meet the appl	icable statutory filing	(optional continuation (optional continuation) (option	al) ng.) Pursuant to t ate will not be l	605,0207 listed as
ecord specifies a delayed effective data	te, but not an effective	time, at 12:01 a.m. or	the earlier of: (b)	The 90th day a	fter the
is med.				5. <u>~</u>	2
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Filing Fee: \$25.00