Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000430701 3)))



H230004307013ABCU

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

		Ta:		
			Division of Corporations	رشنا
			Fax Number : (850)617-6383	
		From	n:	
			Account Name : LEGALZOOM.COM INC.	. •
			Account Number : I20010000062	
			Phone : (323)962-8600	,
	<b>~</b> 1	52 ~	Fax Number : (323)389-0502	
	32	h <u>o o</u>		
	ä	<b>AE-8</b>		
. J	TE CO		er the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.**	e
	حت			
	a)	压污炭	Email Address:	
		3.55		
(,,,,	(ب			
	OEC 19	' &동립		
Land January January	2623	37E	LLC AMND/RESTATE/CORRECT OR M/MG RESIGN	
lien ber	1	C	RAUSH RV AND MOBILE HOME REPAIRS LLC	
			RAUSH KV AND STODILE HOSTE KETAINS LEC	
			Carri Carra at Status	

Certificate of Status	()
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

Dec. 15. 2023 8:47AM

Amerilife

No. 4492 P. 2

## **COVER LETTER**

TO:		ration Se in of Cor	ction porations		
CITYO TIP			V AND MOBILE HOME REF	PAIRS LLC	
SUBJE	C1:		Name of Lim	ited Lisbility Company	<u></u>
The encl	losed A	rticles of	Amendment and fee(s) are sub-	mitted for filing.	
Picase re	eturn ali	correspon	ndence concerning this matter	to the following:	
			Cheyeane Moseley		
			· · · · · · · · · · · · · · · · · · ·	Name of Person	——————————————————————————————————————
			Legalzoom.com, Inc.		
				Pirm/Company	
			101 N Brand Blvd 11th Fl		
				Address	<del></del>
			Glendale, CA 91203		
			wa.	City/State and Zip Code	
			taushrvroofing@gmzil.com		
			E-mail address: (	to be used for future annual report no	ification)
For furth	her info	mation co	ncerning this matter, please ce	ALI:	
Cheyenne Moseley				800 773-0888 at ()	
		Name of	Person	at (	ne Telephone Number
Enclosed	d is a ch	eck for th	e following amount:		
□ <b>\$2</b> 5.	.00 Filin	g 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 (stdittonal copy is enclosed)
		Registra	NG ADDRESS: tion Section to of Corporations	STREET/COUR Registration Section Division of Corpor Clifton Building	
			x 0527 Isee, FL 32314	2661 Executive C	enter Circle

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

No. 4492

P. 3

Det. 15, 2023 8:48AM

To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAUSH RY AND MOBILE HOME REPAIRS LLC	
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on 02/02/2023  Florida document number 1.23000062728	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
	2î
The new same ranst be distinguishable and contain the words "Limited Liability Company," the designation	"LLC" or the abbreviation "LL.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)	
B. If amending the registered agent and/or registered office address on our registered agent and/or the new registered office address here:	xords, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street	address
	. Florida
	. s: MI IMB

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

210 Code

From: Rajiv Srivastava

## Dec. 15. 2023 S: 4SAM Amerillife No. 4492 P. 4 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	<u>Name</u>	Address	Type of Action
AMBR	Paul J. Raush, Jr.	4450 Swallowtail Dr. New Port Richey, FL 34653	
			□ Remove
			Change
			D Add
			D Remove
			☐ Change
			Add
			□ Remove
			Change
			[] Add
			☐ Remove
			Change
			DbA [J
			□ Remove
			Change
			D Add
			☐ Remove
			Change

From: Rajiv Srivastava

i mine	15. 2023 8:48AM Amerillife No. 4492 P soung any outer information, enter change(s) here: (Attach additional sheets, if necessary.)	. 5
-		_
		_
_		<del></del>
_		
_		
_		_
-		
_		
_		_
-		
_		
		_
_		
_		
-		_
ote:	ve date, if other than the date of filing:  cive 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 (if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 1 at's effective date on the Department of State's records.	i05.020 isted as
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	lier.o
ated _	12.14 , 23 . Paul Vaid JR	
	Signature of a member or authorized representative of a member	
	Paul J. Raush, Jr.	

Page 3 of 3

Filing Fee: \$25.00