L23000077849

(Requestor's Name)
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COVER LETTER

	Registration Se Division of Cor			•	•	
01101114	CRUISIN R					
SUBJEC'	l:	Name of Limit	ed Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are subn	nitted for filing.			
Please ren	arn all correspo	ndence concerning this matter to	o the following:			
		Luis Renato Romero				
			Name of Person			
		RV Cruisin				
			Firm/Company			
		13716 Westshire Dr				
			Address			
		Tampa FL 33618				
			City/State and Zip Code			
		renatoromerot@hotmail.com				:
			o be used for future annual	report notificati	ion)	:
For furthe	r information c	oncerning this matter, please ca	.III;			
Luis R. R	omero		813 77 at ()	7-6974		
-	Name o	t Person	Area Code	Daytime Tel	lephone Number	
						C
Enclosed	is a check for th	he following amount:				
□ \$25.0	n Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy is en-		S60.00 Filing l Certificate of Certified Cop (additional copy	Status & Y
	Mailing Addres		Street A			
1	Registration :	Section		ration Sectio		
]	Division of C	Corporations	Divisio	on of Corpor	auons	

P.O. Box 6327

Tallahassee, FL 32314

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

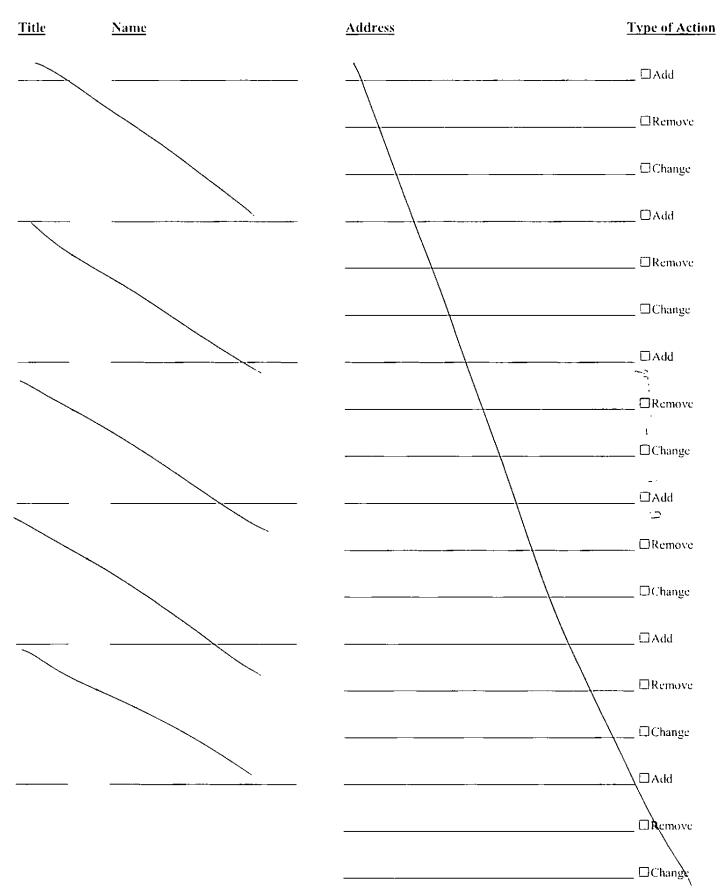
(Name of the Limited Liability Comp. (A Florida Limited	nny as it now appears on our records.) Liability Company)	<u> </u>
The Articles of Organization for this Limited Liability Company florida document number $\frac{1.23000077849}{1.23000077849}$.	were filed on <u>02/13/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
'he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	13731 Juniper Bossom Dr Apt 101	<u>.</u>
Principal office address MUST BE A STREET ADDRESS)	Tampa FL 33618	,
		!
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BON)		2
3. If amending the registered agent and/or registered office	address on our records, <u>enter the nam</u>	e of the new register
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member



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fective date, if other than the	he date of filing:	(on	tional)
n effective date is listed, the date n	he date of filing: must be specific and cannot be prior to	date of filing or more than 90 days af	ter filing.) Pursuant to 605.020
	block does not meet the applicable Department of State's records.	le statutory filing requirements, t	his date will not be listed a
	•		
ecord specifies a delayed effec- is filed.	tive date, but not an effective time	e, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
November 1	2023		
nca	·	·	

Typed or printed name of signee