Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

 Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RGH PROPERTY CARE LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION & OF

RGH Property Care LLC				
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 02/20/23	and assigned		
Florida document number L23000089541				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	ility Company." the designation "LLC" or the al	obreviation "L.L.C."		
Enter new principal offices address, if applicable:	4820 50th Dr.			
(Principal office address MUST BE A STREET ADDRESS)	Vero Beach, FL 32967			
Enter new mailing address, if applicable:	4820 50th Dr.			
(Mailing address MAY BE A POST OFFICE BOX)	Vero Beach, FL 32967			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address	ne of the new registered		
	, Florida	Zip Code		
New Registered Agent's Signature, if changing Registered Agent	<u> </u>	Ω L		

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>	Address	Type of Action
			🗆 Add
			□Remove
			□Change
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