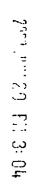
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Office Use Only



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## **COVER LETTER**

TO: Registration So Division of Cor	ection rporations				
RokMor L	LC				
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Carlos Orellano				
	T	Name of Person			
	ZenBusiness INC				
	<del></del>	Firm/Company			
	336 E. College Ave Suite	301			
	<del></del>	Address			
	Tallahassee, FL 32301				
		City/State and Zip Code	(a		
	fulfillment@zenbusiness.co		ĆĘ.		
	E-mail address; (	(to be used for future annual report notification)	(S)		
For further information c	oncerning this matter, please c	all:	0		
Carlos C/O ZenBusines	s, Inc.	844 493-6249 at ( )	ا بن		
Name o	f Person	Area Code Daytime Telephone Number			
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filin  Certified Copy (additional copy is enclosed)	of Status & opy		
Mailing Addres		Street Address:			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RokMor LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) .lability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 2023-02-22	and assigned
lorida document number 1.2.3000096106		
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 Liabil	ity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<b>-</b> ــــ
Principal office address MUST BE A STREET ADDRESS)		67
	,	, <u>a</u>
		20
Enter new mailing address, if applicable:		<b>3</b> .
Mailing address MAY BE A POST OFFICE BOX)	····	بب
		17:13 02
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our records, <u>enter the n</u>	ame of the new regis
Name Parsistanced Office Address.		
New Registered Office Address:	Enter Florida street address	<del></del>
	Florida	
<del></del>	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 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
MGR	Stephen John Morrison	161 10th C1	□Add
		Vero Beach, FL 32962	□Remove
			≅Change
AMBR	Rokas Kestitus Cesnakauskas	1957 SE Benedictine St	□Add
		Port St Lucie, FL 34983	□Remove
			■Change
AMBR —	Eliott Verneuil	410 Cedar Ave	Add
		New Smyrna, FL 32169	□Remove
			□Change
			DAdd .>2 .>2
			Remove
			EChange 
			□Add
			□Remove
			☐ Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change

Effective date, if other than the date of filing:  (optional)  (an effective date, if such that the date of filing:  (optional)  (an effective date is fissed the due must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record 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 rd is filed.  2023  [8] Stephen John Morrison  Signature of a member or authorized representative of a member  Siephen John Morrison, Manager	If amendir	ig any other information, enter change(s) here: (Attach additional sheets, if n	ecessary.)
Effective date, if other than the date of filing:  [an effective 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 605.0207.  [Anterior date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  [Anterior date of the date on the date on the Department of State's records.]  [Anterior date of the date on the date on the date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed.  [Anterior date of the dat			
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### Active date, if other than the date of filing:    (optional)			
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	:	Stephen John Morrison, Manager	<u></u>

Filing Fee: \$25.00