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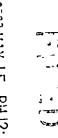
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COVER LETTER

Registration Section

Division of Corporations

TO:

R30 ERP	LLC				
SUBJECT:	Name of Limited Liability Company				
	f Amendment and fee(s) are sub				
Please return all corresp	ondence concerning this matter	to the following:			
	JAVIER GUZMAN				
Name of Person					
	R30 ERP LLC .				
		Firm/Company			
	5252 NW 85TH AVE AP	F 1107			
		Address			
	DORAL, FL. 33166			4,4][
		City/State and Zip Code		· · · · · · · · · · · · · · · · · · ·	2023 ISAY 15
	USTUEMPRESA@GMAII E-mail address: (COM to be used for future annual report notification	<u> </u>	· .	-<
For further information of	concerning this matter, please c	•		ر. د د ح	
JAVIER GUZMAN		786 340-0372		INSTA	PH 12: 25
Name (of Person	at () Area Code Daytime Tele	ephone Number	171	25
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate of Certified Co (additional cop	of Status opy	
Mailing Address Registration Division of C P.O. Box 633 Tallahassee.	Section Torporations 27	Street Address: Registration Section Division of Corpora The Centre of Talla 2415 N. Monroe Str	itions hassee		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R30 ERP LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{03/13/2023}{1}$ and assigned Florida document number $\frac{1.23000130102}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NΑ The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." NΛ 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 records, enter the name of the new registered agent and/or the new registered office address here: NΑ Name of New Registered Agent: NΛ 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.

City

 $N\Lambda$

If Changing Registered Agent, Signature of New Registered Agent

. Florida ^{NA}

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	JAVIER GUZMAN	5252 NW 85TH AVE APT 1107	□Add
		DORAL, FL 33166	Remove
			□ Change
AMBR	PEDRO ROSA	5252 NW 85TH AVE APT 1107	
		DORAL, FL 33166	□Remove
			□Change
AMBR	JAIRAM ROSA	5252 NW 85TH AVE APT 1107	= Add
		DORAL, FL 33166	□Remove
		·	□Change
AMBR	IRAIDA MONTILLA	5252 NW 85TH AVE APT 1107	≣ Add
		DORAL, FL 33166	□Remove
			Change
NA 	NA	NA III	Change
		1-	15 75 Change
NA	NA	NA	□Add
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an effe	ctive date is listed, the date must be a	specific and cannot be prior	to date of filing or more than 9	0 days after filing.	Pursuant to 60	5.0207
	f the date inserted in this block on its effective date on the Depart		ible statutory tiling require	ments, this date	will not be its	ted as
record	specifies a delayed effective dat	te, but not an effective ti	me, at 12:01 a.m. on the ea	rlier of: (b) Th	e 90th day afte	er the
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