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2023 MAY 23 AM 6: 57 SECRETARY OF STATE



COVER LETTER

TO:

TO: Registration 5 Division of Co			
SUBJECT: R&G Peri	formance LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mited for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Megan Roberts		
		Name of Person	
	R&G Performance LLC		
		Firm Company	
	2073 SW Cranberry St		
		Address	
	Port St Lucie, FL 34953		
	Port St Eddle, FL 34933	City State and Zip Code	
	meganhaileyy6@gmail.com	· · · · · · · · · · · · · · · · · · ·	
		to be used for future amual report n	otification)
For further information	concerning this matter, please c	all:	
Megan Roberts		561 402-0644	
	of Person	at (561) 402-0644 Area Code Dayt	ime Telephone Number
Enclosed is a check for	the following amount:		
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr	P55:	Street Address:	
Registration Section		Registration S	Section
	Corporations	Division of C	orporations
P.O. Box 63		The Centre of	
Tallahassee.	FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R&G Performance LLC		
(Name of the Limited Liability (A Florida)	y Company as it now appears on our re Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{3(15(2023))}{2}$	and assigned
Florida document number L23000134249	_ '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company." the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	·
		2023 SEC.
		AHA "T
Enter new mailing address, if applicable:		SA SE
(Mailing address MAY BE A POST OFFICE BOX)		mo
		7 5 11 E
	~~	3 3 5
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, en	iter the name of the new registered
Name of New Registered Agent:		
Nav. Pagistared Office Address:		
New Registered Office Address:	Enter Florida street address	
		. Florida
	Cíty:	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance of my dutie ent as provided for in Chapter 6	s, and I am familiar with and 05. F.S. Or, if this document is

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
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□ Add
			□ Remove
			
			□Add
			□ Remove
		 	□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			∏Change

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tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to date of filing. If the date inserted in this block does not meet the applicable statutor	ng or more than 90 days after filing.) Pursuant to 605.0 v. filing requirements, this date will not be listed
ment's effective date on the Department of State's records.	
ord specifies a delayed effective date, but not an effective time, at 12:01 filed.	a.m. on the earlier of: (b) The 90th day after
1. April 15th	
April 15th . 2023 .	

Typed or printed name of signee

Megan Roberts