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(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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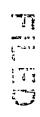


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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Corp	porations		
aun in απ. RAIA Γ	DESIGN STUDIO I	I.C.	
SUBJECT: TO VIA L		ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Ole	NAMINA DACEDANIA	
	G(C	Name of Person	
		Firm/Company	
	300 SE 2N	D STREET, SUITE 600 :	# 59
		Address	
	FORT LA	AUDERDALE, FL 33301	
		City/State and Zip Code	
	VADA	AGILLC@GMAIL.COM to be used for future annual report notification	
		•	1)
For further information co	ncerning this matter, please ca	all:	
GIOVANNA F	PASTRANA	at (_305_) 209-7961	
Name of	Person	Area Code Daytime Teler	phone Number
Enclosed is a check for the	e following amount:		
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & [Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S		Street Address: Registration Section	
Division of Co		Division of Corporat	ions 😥 😸

The Centre of Tallahassee

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAIA DESIGN STUDIO LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	(A Fronda Billined Elability Company)	•	
The Articles of Organization for this Limited L	Liability Company were filed on _	08/01/2023	and assigned
Florida document number <u>L23000361101</u>	<u> </u>		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability company h	<u>nere</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u></u>		
			
B. If amending the registered agent and/or agent and/or the new registered office addre	•	records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	orida street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete performance of istered agent as provided for in registered office address, I here	f my duties, and I am Chapter 605, F.S. O	familiar with and r, if this document is
	If Changing Registered A	gent, Signature of New R	legistered Agent
	** **	· ·	1100 _

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
AMBR	ALEJANDRO RUIZ GONZALEZ	300 SE 2ND STREET SUITE 600-59	🖒 Add
		FORT LAUDERDALE, FL 33301	□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
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			🗆 Remove
		ALL	Change Change
			Remove
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If amending any other	er information, enter c	change(s) here: (A)	tach additional sheets	s, if necessary.)	
					
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(If an effective date is listed, Note: If the date insert	er than the date of filing the date must be specific and ed in this block does not ate on the Department of	nd cannot be prior to date meet the applicable s	of filing or more than 90 ctatutory filing requirem	(optional) days after filing.) Pursu ments, this date will no	ant to 605.0207 (3) of be listed as the
he record specifies a delu ord is filed.	yed effective date, but no	ot an effective time a	1 12:01 a.m. on the earl	ier of: (b) The 90th	day after the
Dated July 1	6th	2024		SEC. TALI	F] [_ 2024 NUG 14
	1/2			2 A	- p===*
	\	member of methority	representative of a member	er DG DG DG	PH : 0
		1	lafla - AMBI		