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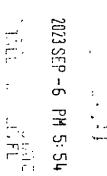
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COVER LETTER

Division of Corp			
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SUBJECT: OT. C	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	01	(10,0)(0,0)	
	RUBEN	Name of Person	
	St. Rosta	R&C LLC	
		P&C LLC Firm/Company	, , , <u>.</u>
	8785	Buthpage Ln	
		Address	
	Davenp	Ort, FL 33896 City/State and Zip Code	
			· · · · ·
	EU ban . E-mail address: t	Caitlin 23@gmail	· Com
For further information co	oncerning this matter, please ea		
Rubon a	1avc2	at (<u>407</u>) <u>400</u> Area Code Daytim	-3193
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	e following involuti		
	-	(T) \$55 00 CH C C	The Sample Library Ray
\$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	. .	Street Address:	
Registration S		Registration Se	
Division of Co		Division of Cor	*
P.O. Box 632		The Centre of T	*

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

St. Rose R&C LLC	2023 SEP -6 PM 5: 54
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on 0 . Florida document number 123000384439 .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here	2:
The new name must be distinguishable and contain the words "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
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 BON)	
B. If amending the registered agent and/or registered office address on our rec agent and/or the new registered office address here:	ords, <u>enter the name of the new registerec</u>
Name of New Registered Agent:	
New Registered Office Address: Enter Florid	a street address
	. Florida

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.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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	Ruben Chavez	8785 Bethpage Un	× Add
		Davenport, FL 33896	□Remove
			[]Change
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Effective date, if other than the date of filing: (If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 405 0.207 (3 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 ord is tiled. Dated September 2 . 2023 Signature of a mental millionized representative of a member Amount 2 Typed or printed name of space:	•	
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Dated September 2 2023 Signature of a member authorized representative of a member	Note:	If the date inserted in this block does not meet the applicable statutory tiling requirements, this date will not be listed as the
Signature of a member authorized representative of a member		
	Dated	September 2 2023
		Signature of a member authorized representative of a member
/		

Filing Fee: \$25.00