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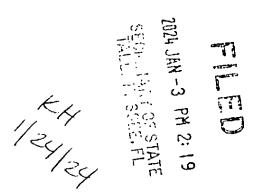
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## **COVER LETTER**

Division of Cor	porations				
	IT, LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The analogue Amislus of	A	and the first			
The enclosed Afficies of	Amendment and fee(s) are sul	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Valerie Martino				
		Name of Person		•	
	Reffpoint LLC				
		Firm/Company	<u> </u>		
	10830 NW 138th St Unit i	#3			
		Address			
	Hialeah Gardens, FL 3301	8			
		City/State and Zip Code			
	reffpointllc@gmail.com			2	
	E-mail address: (	to be used for future annual report notif	ication)	SEC TEC	-
For further information co	oncerning this matter, please c	all:		是	ر موروع در موروع و موروع
Valerie Martino		954 5593187 at ( )		SECTUMES STALLMES	1
Name of	f Person		Telephone Number	PH 2: 19	(°
Enclosed is a check for th	ne following amount:			TATE	
\$25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55 00 EHLL ELL 9.	□ ¢<0.00 m		
2 525.00 1 mmg 1 cc	Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
Mailing Address	<u>s:</u>	Street Address:			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

**Registration Section** 

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Reffpoint LLC			
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company		and assign	ned
Florida document number L23000471316			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "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 BOX)			
3. If amending the registered agent and/or registered office		202 SS	
	-	7.C. J.	<u>—</u>
3. If amending the registered agent and/or registered office	address on our records, enter the	name of the new F	egister
gent and/or the new registered office address here:		<u>်း</u> မ် နို	
		- 울의 - 글	
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:		-LATE 919	
	Enter Florida street address		
	, Florid	a	
<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 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 N Martino	10830 NW 138th St Unit #3 Hiale	eah gardens, FL 33018 ■Add
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an effective da ote: If the d	ate is listed, the date late inserted in the fective date on the	must be specific a is block does not	nd cannot be pr meet the app	rior to date of fi olicable statute	ling or more than	ı 90 days after	filing.) Pu	rsuant to ( I not be I	605.0207 ( listed as t
record specif l is filed.	lies a delayed effe	ective date, but n	ot an effective	e time, at 12:0	)1 a.m. on the	earlier of: (b	) The 90	)th day a	fter the
ated	Dec	28	<u> </u>	<u>23</u> .	Ĵ				
			Va	WIK	mo				
		Signature of	i member or au	ithorized repre	sentative of a me	ember			
					signee				