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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KCO SERVICES, LLC Account Number : I2020000018 : (954)744-6605 Fax Number : (833)648-2730

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: rhgroupconsulting@gmail.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RH GROUP CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RH GROUP CONSULTING LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny ay It now appears on our reco ability Company)	ot ds.)
The Articles of Organization for this Limited Liability Company  Florida document number L23000472158  This amendment is submitted to amend the following:	were filed on10/13/2023	and assigned
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "Li	LC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TOZS JAN 30 AN
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>ent</u>	er the name of the new register
Name of New Registered Agent:		

## 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

If Changing Registered Agent, Signature of New Registered Agent

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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	ARROYO CARRUYO, LEONARDO E	3655 HW 115TH AVE, SUITE 17	<u>≡</u> Add
		DORAL, FL 33178	DRemove
			🗆 Add
			©Remove
		***************************************	Change
			□Add
			ERemove
····	<del></del>	<del> </del>	[:] Add
		<del></del>	[]]Remove
			Clange
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