## L23000504071

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COV	ER LETTER
O: Registration Section Division of Corporations	I
UBJECT: R&M Service and	
Name of Limited Liab	ility Company
he enclosed Articles of Amendment and fee(s) are submitted f	or filing.
lease return all correspondence concerning this matter to the fo	ollowing:
Marely S	anc of Person
F	imi/Company
12340 SW 2	20 St.
miami Fl	331710
City/S	tate and Zip Code
Marely Saavedra	d for future annual report notification)
For further information concerning this matter, please call:	d for future annual report notification)
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	ar(301) 490,6000 5 5
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status C	55.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: 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

he Articles of Organization for this Limited Liability Company were filed on lorida document number <u>L</u>2300050407 his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (i)lew Registered Agent's Signature, if changing Registered Agent: 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 scept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is

eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title removed from our records:  1GR = Manager  MBR = Authorized Member			name, and address of each pe	rson being added
<u>itle</u>	Name	<u>Address</u>		Type of Action
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		miani	F1 33170	_ □Remove
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f amending any other informat	tion, enter change(s) here	e: (Attach addition	al sheets, if necess	sary.)	
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Effective date, if other than the fan effective date is listed, the date must Note: If the date inserted in this blodocument's effective date on the Do	t be specific and cannot be prior ock does not meet the applic	able statutory filing	t man 90 days after in	ial) 2 2 ling.) Pursuant to 605 late will not be list	5.0207 (3 ed as th
record specifies a delayed effective d is filed.	e date, but not an effective ti	ime, at 12:01 a.m. on	the earlier of: (b)	The 90th day afte	r the
Dated NOV 27	, 2023	3			
- May s	Signature of a member or author	orized representative of	`a member		
, i					
Marely	Saared Ca Typed or print	ed name of signee			