

L23 000 849 301

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

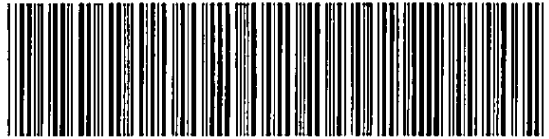
(Business Entity Name)

(Document Number)

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2024 JAN 22 AM 10:43  
FILING OFFICE  
TOLSON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RIO PROFESSIONAL SERVICES LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rodrigo A Martinez Perez  
Name of Person

RIO PROFESSIONAL SERVICES LLC  
Firm/Company

15682 SW 40th St  
Address

Miramar, Florida, 33027  
City/State and Zip Code

rioprofessionalservicesllc@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rodrigo A Martinez at ( 786 ) 6784328  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

2024 JAN 22 AM 10:43  
SECRET  
TALLAHASSEE

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

RIO PROFESSIONAL SERVICES LLC

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

The Articles of Organization for this Limited Liability Company were filed on December 12, 2023 and assigned Florida document number 123000549301.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

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 applicable:**

*(Principal office address MUST BE A STREET ADDRESS)*

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

**New Registered Office Address:**

Enter Florida street address

## Florida

CIV

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 Changing Registered Agent, Signature of New Registered Agent**

**MGR =** Manager  
**AMBR =** Authorized Member

[illegible]

2024 JAN 22 14:10:14  
SECRETARY OF THE  
NAVY

2024 JAN 22 PM 10:14  
SECRETARY OF THE  
TREASURY

**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.

Dated January 12 \_\_\_\_\_, 2024

Signature of a member or authorized representative of a member

Rodrigo A Martinez Perez

Typed or printed name of signee