L24000003747

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CAPITAL CONNECTION, INC.

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Royal Global G	roup LLC	
Please Debit FO	CA000000003 For: 30	
Thank you Sath	Maalay	
Thank you Seth	Neeley	
Straf	<u></u>	Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitions Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
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		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
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		UCC 11 Search
Name	Date Time	UCC 11 Reineval
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COVER LETTER

TO: Registration Se Division of Cor			
=	LOBAL GROUP LLC		
SUBJECT:		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nuitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	NAHIROBY LOZANO		
		Name of Person	
	NL TAX CONSULTANT	INC	
		Firm/Company	
	1436 W 49TH STREET		
		Address	
	HIALEAH, FL 33012		
		City/State and Zip Code	
	NAHIROBY@NLTAXCO		
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please co	all:	
NAHIROBY LOZANO		305 982-8281	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
□ \$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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ROYAL GLOBAL GROUP LLC

2024 JAN 31 AM 10: 14

			ALLAHASSEE, FLORIDA
he Articles of Organization for this Limited	Liability Company	were filed on 12/26	/2023 and assigned
lorida document number L24000003747	 -		
his amendment is submitted to amend the fo	llowing:		
. If amending name, enter the new name	of the limited liab	oility company here	į.
ne new name must be distinguishable and contain the	words "Limited Liahi	lity Company" the desi	vantion "LLC" or the abbreviation "LLC"
		1992 LEWIS TURNER BLVD SUITE 1067	
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u>)		FORT WALTON BEACH, FL 32547	
nter new mailing address, if applicable:		19121 NW 5TH PLACE	
Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 33169	
. If amending the registered agent and egistered agent and/or the new registered of New Registered Agent:	d/or registered of office address her CHRISTOPHE	<u>'e</u> :	ur records, enter the name of the
gistered agent and/or the new registered	office address her	ER SOTO H PLACE	
Name of New Registered Agent:	office address her CHRISTOPHE	ER SOTO H PLACE	a street address
	office address her CHRISTOPHE	ER SOTO H PLACE Enter Florida	

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

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

Title	Name	Address	Type of Action
AMBR	CHRISTOPHER SOTO	19121 NW 5TH PLACE	
		MIAMI, FL 33169	☐ Remove
			■ Change
		*	
			☐ Remove
			☐ Change
			□ Add
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fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to de ote: If the date inserted in this block does not meet the applicable occurrent's effective date on the Department of State's records.	(optional) ate of filing or more than 90 days after filing.) Pursuant to estatutory filing requirements, this date will not be	605.0 listed
record specifies a delayed effective date, but not ar The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the ea	arlier
ated JANUARY 30 . 2024		
X Signature of a unember for authorized	d representative of a member	_

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Filing Fee: \$25.00