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TO:

TO: Registration S Division of Co			
R&S ELI	ECTRONIC INDUSTRIA LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ALBERTO M, REYE	ES	
		Name of Person	
		Silbult L.	
		Firm/Company	
	8340 NW 74TH AVE		
		Address	
	MEDLEY FL 33166		
		City/State and Zip Code	
	msalcedo@salcedogroupcpa		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please co	all:	
MARINA SALCEDO		1 305-215-116 at ()	e Telephone Number
'Name o	of Person	Area Code Daytim	e 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 Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		NDUSTRIA LLC	
(<u>Name of the Li</u>	mited Liability (A Florida L	Company as it now appears on our i imited Liability Company)	records.)
The Articles of Organization for this Limited	Liability Cor	npany were filed on 01/09/2024	and assigned
Florida document number 124000020931			
This amendment is submitted to amend the fo	ollowing:		
A. If amending name, enter the new name	of the limite	d liability company here:	
R&S ELECTRONIC INDUSTRY LLC			
The new name must be distinguishable and contain the	e words "Limited	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if app	licable:	N/A	
(Principal office address MUST BE A STRE		SS)	
			207
		•	732
Enter new mailing address, if applicable:		N/A	-3
(Mailing address MAY BE A POST OFFICE BOX)			-0
B. If amending the registered agent and/or agent and/or the new registered office addr	registered of	fice address on our records, <u>er</u>	nter the name of the new registere
	eno trei c.		
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street ac	ldress
			, Florida
		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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A 		□Add
			□Remove
			Change
	N/A —		
			□Change

			□Remove
			□Change
		-	□Add
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te: If	date, if other the ve date is listed, the c the date inserted in 's effective date or	date must be specif I this block does	fic and cannot be not meet the a	e prior to date of	filing or more tha utory filing requ	(option on 90 days after fi direments, this of	n al) iling.) Pursuant to date will not be	605.02 listed
cord s s filed	occifies a delayed e	effective date, bu	it not an effec	tive time, at 12	2:01 a.m. on the	carlier of: (b)	The 90th day a	ifter th
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		Signature	of a member or	authorized so-	-contotion of a			
		Signature	of a member or	authorized repr	resentative of a m	ember		