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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Contilled Control |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO:

| TO: Registration Division of C | | | |
|-----------------------------------|--|---|---|
| RISAS | FACTORY ORLANDO, LLC | | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles | of Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corres | pondence concerning this matter | to the following: | |
| | DI | IANA C. GONZALEZ DIAZ | |
| | | Name of Person | |
| | RISA | S FACTORY ORLANDO, LLC | |
| | | Firm/Company | |
| | 4591 | INTERNATIONAL DR # FC8 | |
| | | Address | |
| | (| DRLANDO FL 32819 | |
| | | City/State and Zip Code | |
| | | sasfactoryusa@gmail.com | |
| | | to be used for future annual report noti | fication) |
| For further information | n concerning this matter, please c | all: | |
| DIANA C C | ONZALEZ DIAZ | 754 946 0040 at () | |
| Nam | e of Person | Area Code Daytim | e Telephone Number |
| Enclosed is a check fo | r the 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) |
| P.O. Box 6 | n Section Corporations | Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL | porations allahassee . e Street, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | Or | |
|------|---|--|
| RISA | AS FACTORY ORLANDO, LLC | |
| | ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | |

| (A Florida Limited Lia | bility Company) | , | |
|--|------------------------------------|---|--------------------------------------|
| The Articles of Organization for this Limited Liability Company w Florida document number | rere filed on | 01/11/2024 | and assigned |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liabili | ty company he | re: | |
| The new name must be distinguishable and contain the words "Limited Liability | Company," the de | esignation "LLC" or the abb | reviation "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 ad agent and/or the new registered office address here: | dress on our re | ecords, <u>enter the name</u> | of the new registered |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Flori | da street address | |
| | | , Florida | |
| | City | | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change. | erformance of i ovided for in C | my duties, and I am fa hapter 605, F.S. Or, ij | miliar with and Tthis document is |

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> | Name | <u>Address</u> | Type of Action |
|--------------|--------------------|---|----------------|
| MGR | GONZALEZ, PEDRO A. | 3055 NW 126TH AVE. APT 303 | ■ Add |
| | | SUNRISE FL 33323 | □Remove |
| | | | |
| | | *************************************** | 🗀 Add . |
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| ectiv | ve date, if other than the date of filing: |
| n offo te: I | ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020° if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as |
| | nt's effective date on the Department of State's records. |
| | |
| eord | specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
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| is file | June-21 2024 |
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Filing Fee: \$25.00