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(Business Entity Name)	-
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Special Instructions to Filing Officer:	

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Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations

RPQ Real Estate, LLC

SUBJECT: _

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:

Matthew Taub

Name of Person

RPQ Real Estate, LLC

Firm/Company

3515 SE Willoughby Blvd

Address

Stuart, FL 34994

City/State and Zip Code

sandy@goodbookkeeper.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

S55.00 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 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

RPQ Real Estate, LLC

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

The Articles of Organization for this Limited Liability Company were filed on ______ and assigned _______ and assigned _______.

This amendment is submitted to amend the following:

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

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ation "LLC" or the ablieviation "LLC."

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

Name of New Registered Agent:	Matthew Taub			
New Registered Office Address:	3515 SE Willoughby Blvd.			
	Enter Floridu street address			
	Stuart	, Florida ³⁴⁹⁹⁴		
	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

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<u>Title</u>	Name	Address	Type of Action
AP	David J. Davidson	151 NW 1st Avenue	🗆 Add
		Delray Beach, FL 33444	Remove
			🗆 Change
			🗆 Add
			Change
			□Add
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			bbAC
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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____ (optional)

E. Effective date, if other than the date of filing: _______(optional) (If an effective 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 605.0207 (3)(b) 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.

If the record 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 record is filed.

Dated_ Signature of a member or authorized representative of a member

Matthew Taub

Typed or printed name of signee