



Office Use Only





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COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: ROAD	Fiducia LLC				
SUBJECT: Trego	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Maison Burl	001			
		Name of Person			
	Rego Fiduc	ia LLC			
	J	Firm/Company	_		
	3941 Playa	Del Sol Dr. #1	02		
	<u> </u>	Address			
	Rockladge	F1 37955			
	Rockledge,				
	administrat	ion@regofiduci	a.com		
			icaron)		
For turner information c	oncerning this matter, please c	an.			
Maison Bur	bol	at (<u>540</u>) <u>755 -</u>	9303		
Name o	f Person	Area Code Daytime	e Telephone Number		
Enclosed is a check for th	-	_	_		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &		
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations			Division of Corporations		
P.O. Box 632		The Centre of T			
Tallahassee, l	ru <i>323</i> 14	2410 N. Monto	e Street, Suite 810		

Tallahassee, FL 32303

Tallahassee, FL 32314



May 7, 2024

MAISON J. BURBOL 3941 PLAYA DEL SOL DR. #102 ROCKLEDGE, FL 32955

SUBJECT: REGO FIDUCIA LLC Ref. Number: L24000067193

We have received your document for REGO FIDUCIA LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 624A00009948

Anissa Butler Regulatory Specialist II

www.sunbiz.org

Division of the DO DOM (2008 TO 1) 1 DOM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	A Florida Limited L	iability Company)	ecoras.)	
The Articles of Organization for this Limited Lia Florida document number <u>L240000 7 1°</u> This amendment is submitted to amend the followard that the followard for the new name of the new name of the followard for this Limited Lia for the new name of the followard for this Limited Lia for the followard for	ving:	·	RY HAS	signed
A. If amending name, einer the new hame of the M i Δ	ine miniteu napi	nty company nere:	PH L	Ď
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ty Company," the designation	"LLC" or the aubreviation "I	L.C."
Enter new principal offices address, if applical (Principal office address MUST BE A STREET)		3941 Playa Hi02 Rockledge, F	Del Soi Dr. L 32955	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	3941 Playa #102 Rockiedge, !	Del Soi Dr. FL 32955	
B. If amending the registered agent and/or regagent and/or the new registered office address		ddress on our records, <u>e</u>	enter the name of the ne	w registered
Name of New Registered Agent:	Maison	Burbol		
New Registered Office Address:	3941 PI	aya Del Sol Enter Florida street d	Dr. #102 address	
	Rockled	<u>ge</u>	, Florida 32955 Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

Rego Fiducia LLC

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.

Muscle 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_	NIA	NA	□Add
		<u> </u>	□ Remove
		 	□ Change
N/A_	N/A	NIA	
			□Remove
			Change
N/A_	N/A	N/A	
			Remove
			Change
N/A_	N/A	N/A	□Add
			Remove
			□Change
NIA	N/A	N/A	□Add
			□Remove
			Change
NÍA	N/A	N/A	□Add
			
			□Change

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Note: If the date:	other than the d listed, the date must be nserted in this bloc ve date on the Dep	k does not mee	t the applicable	2024 ate of filing or more statutory filing r	(option than 90 days after equirements, this	onal) filing.) Pursuant to 60 date will not be li	 05.0207 (sted as t
e record specifies and is filed.	delayed effective of	date, but not an	effective time,	at 12:01 a.m. on	the earlier of: (b) The 90th day af	ter the
Dated May	14,2024 s						
1		M In	. /				

Filing Fee: \$25.00