(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	ก
(Oit	y/Otate/Zip/r none #	")
PICK-UP	☐ WAIT	MAIL
		L)
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	f Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

Ruby Phoenix LLC SUBJECT:	Limited Liability Company	
	Limited Liability Company	
Name of		
The enclosed Articles of Amendment and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mal	tter to the following:	
Jillian Malinski		
	Name of Person	_
Ruby Phoenix LLC		
	Firm/Company	-
920 Belville Blvd		
	Address	-
Naples, FL 34104		
	City/State and Zip Code	_
trading@rubyphoenixllc	c.org ss: (to be used for future annual report notification)	
	·	
For further information concerning this matter, pleas	ge cair:	
Jillian Malinski	215 688-2679 at ()	
Name of Person	Area Code Daytime Telephone Number	er .
Enclosed is a check for the following amount:		
■ \$25.00 Filing Fee	(additional copy is enclosed) Certific	ate of Status &
Mailing Address: Registration Section	Street Address: Registration Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ruby Phoenix LLC			
Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)	
he Articles of Organization for this Limited I orida document numberL24000108496		March 4th, 2024	and assigned
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name	of the limited liability company l	here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the a	obreviation "L.L.C."
nter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
nter new mailing address, if applicable: Muiling address MAY BE A POST OFFICE	<u> </u>		
	•		
3. If amending the registered agent and/or gent and/or the new registered office addre	E, r	records, enter the name	ic of the new regis
Name of New Registered Agent:	Sebastian Rybicki		P III
New Registered Office Address:	Enter Fl	orida street address	2:44
		. Florida	
	City	, riofida	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>	Name	Address	Type of Action
MGR	Sebastian Rybicki	920 Belville Blvd	= Add
		Naples, FL 34104	□Remove
			Change
AMBR	Jillian Malinski	920 Belville Blvd	
		Naples, FL 34104	□ Remove
			■ Change
		 	□Add
			□Remove
		<u>, , , , , , , , , , , , , , , , , , , </u>	☐ Change
			□Add
			□Remove
			Change
			Remove
			□Change
			□Add
			□Remove
			□ Change

amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necessary.)	
 		
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ffective date, if other than the an effective date is listed, the date mustote: If the date inserted in this blocument's effective date on the December 2.	st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua lock does not meet the applicable statutory filing requirements, this date will no	int to 605,0201 of be listed as
record specifies a delayed effectiv lis filed.	we date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	day after the
June 6th	2024	
ated		
()a	en maled	
	Signature of a member or authorized representative of a member	
Jillian Malinski		
- <u> </u>	Typed or printed name of signee	