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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RASI

Account Number : I20220000023

Phone : (800)221-2972

Fax Number : (917)243-5843

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RMJJ GROUP LLC

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Help

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| RMII Group LLC  |   |
|---|---|
| (Name of the Limited Liability Cor<br>(A Florida Limit  | mnany as it now appears on our records.)<br>ted Liability Company)    |
| The Articles of Organization for this Limited Liability Compa<br>assigned Florida document number L24000251455    | any were filed on June 6, 20 2 4 and                                  |
| This amendment is submitted to amend the following:   |   |
| A. If amending name, enter the new name of the limited !  | siability company here:   |
| The new name must be distinguishable and contain the words "Limited L   | iability Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |   |
| (Principal office address MUST BE A STREET ADDRESS  | 1   |
|   |   |
|   | ·   |
| Enter new mailing address, if applicable:   |   |
| (Mailing address MAY BE A POST OFFICE BOX)  |   |
|   | <u> </u>  |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address i | d office address on our records, enter the name of the new            |
|   |   |
| Name of New Registered Agent:   | = 6 }   |
| New Registered Office Address:  | <del></del>   |
|   | Enter Florida street address  |
| <del></del>   | , Florida   |

## 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

Lexitas

## 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 |
|--------------|--------------------|-------------------------|----------------|
| AMBR         | Jaryel Ramos       | 51 Keer Avenue          | <b>=</b> Add   |
|              |                    | Newark, NJ 07112        |                |
|              |                    |                         | □ Change       |
| AMBR         | Matthew C McKenzie | 226 Woodlawn Terrace    |                |
|              |                    | Collingswood, NJ 08108  | □ Remove       |
|              |                    |                         | □ Change       |
| MGR          | Robert M. Marino   | 37 Indale Avenue        | D Add          |
|              |                    | Staten Island, NY 10309 | □ Remove       |
|              |                    |                         |                |
|              | 4.1                |                         | [D] Add        |
|              |                    |                         | □ Remove       |
|              |                    |                         | ☐ Change       |
|              |                    |                         | bbA □          |
|              |                    |                         | ☐ Remove       |
|              |                    |                         | Change         |
|              |                    |                         |                |
|              |                    |                         | □ Веточе       |
|              |                    | :                       | ☐ Change       |

To:

| Effective date, if other than the date of filing:  "an effective date, if other than the date of filing: "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 605.020  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a locument's effective date on the Department of State's records.  e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed.  Dated  July 12  Significant of a member of authorized representative of a member |             |  |
|--|-------------|--|
| e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed.  Dated July 12   |             |  |
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| Signature of a member of authorized representative of a member   |             |  |
| Signification in member of a member  |             |  |
|  |             | Signature of a member grauthosaked representative of a member  |
|  |             | Typed or printed name of signee  |

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