L24000277043

(Requestor's Name)	
(Address)	
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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
ennieze.	RS INV LL	.C		
SUBJECT:		Name of Limited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Guillermo Castilla-Rosell		
			Name of Person	
		Premier Advisory Group I	ne	
		- Mark	Firm/Company	· · · · ·
	8300 W Flagler Street Ste 254-E			
			Address	
		Miami, FL 33144		
			City/State and Zip Code	
		g.castilla@premieradvisory	= :	
		E-mail address: (to be used for future annual report no	otification)
For further in	nformation c	oncerning this matter, please co	all:	
Guillermo C	astilla-Rosel	ī	305 370-9567	
	Name of	f Person	Area Code Dayti	me Felephone Number
Enclosed is a	i check for th	ne following amount:		
■ \$25.00 H	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)
	iling Addres		Street Address:	
	gistration S		Registration S	
	vision of C D. Box 632	orporations 7	Division of Co The Centre of	•
	llahassee, I			roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RS INV LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our reco liability Company)	<u>rds.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number 1.24000277043	were filed on <u>06/18/2024</u>	aı	nd assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
N/A			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LI	,C" or the abbreviat	ion "L.L.C."
Enter new principal offices address, if applicable:	8216 SW 37TH ST		
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33155		
		<u>-!</u>	2
Enter new mailing address, if applicable:	8216 SW 37th St		[24 OCT
Mailing address MAY BE A POST OFFICE BON	Miami, FL 33155		9
		•	<u>ਾ</u>
		,	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	er the name of the	<u>ie^rngw registe</u>
Name of New Registered Agent: N/A			
New Registered Office Address:	Enter Florida street addr	ess	
	,	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.

City

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMRR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove

N/A	
	
	
	
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Note: If the	date, if other than the date of filing:
he record sp ord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	10/2024
	Signatur of member acauthorized representative et a member
	Guillerron Castilla-Rosell
	Typed or printed name of signee

Filing Fee: \$25.00