L95000000469

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COVER LETTER

TO:	Registration Se Division of Cor			G.	
SUBJE	R-Lines, L.	C.			
,		Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		Magdy Barakat			
			Name of Person		
		R-Lines, L.C.			
			Firm/Company		
		5923 Ravenswood Road #	G-1		
	Address Fort Lauderdale, Fl 33312				
		hvac.solutions@hotmail.com			
			to be used for future annual report notifi	cation)	
For fur	ther information c	oncerning this matter, please ea	all;		
Madg	y Barakat		954 457-7777 at ()		
	Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclos	ed is a check for th	ne following amount:			
⊡ \$2.	5.00 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)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R-Lines, L.C.		
(Name of the Limited Liabilit 1A Florida	y Company as it now appears on our records. Limited Liability Company)	.1
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned
lorida document number L95000000464	<u>_</u> ·	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limi	ted liability company here:	
		Co.
ne new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	-	<u></u>
Principal office address MUST BE A STREET ADDR	ESS)	
		్. ర్హ
Inter new mailing address, if applicable:		. w
Mailing address MAY BE A POST OFFICE BOX)		
		
		*
3. If amending the registered agent and/or regist		enter the name of the
egistered agent and/or the new registered office addi	ress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Ela	rida
	, F10	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 sor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
-			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			<u></u>
			Remove
			☐ Change
			Add
		1.152.112	□ Remove
			☐ Change
			☐ Remove
			□ Change
			□ Remove
			☐ Change

Magoy Bara	cat is the sole own	er of the memb	pership intere	st in R-Lines,	L.C., and the	sole manager	
of R-Lines, L	C.						
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			August 28 20	018			
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Filing Fee: \$25.00