P14000085354

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CORPORATE ACCESS, _

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INC.

11NC. 236 East (

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK	UP: <u>01/17/2020</u>
CERTIFIED COPY	
РНОТОСОРУ	
CUS	
FILING	AMENDMENT
RED EMBER MANAGEM	IENT, INC.
(CORPORATE NAME AND DOCUME	ENT #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RED EMB	ER MANAGEME	ENT, INC.		
DOCUMENT NUMB	ER: P140000853	54			
The enclosed Articles of	f Amendment and fee are s	ubmitted for filing.			
Please return all corresp	ondence concerning this ma	atter to the following:			
•	JASON BROWN				
		Name of Contact Perso			
_	RED EMBER MA	ANAGEMENT IN	IC		
	Firm/ Company 509 MOBILE AVE				
_		Address			
[DAYTONA BEAC	CH, FL 32118			
		City/ State and Zip Cod	e		
SUN	INYFL@live.com	1			
		sed for future annual report	notification)		
or further information	concerning this matter, pleas	se call:			
ason Brown		at (386	, 341-7488		
Name of	Contact Person		de & Daytime Telephone Number		
sclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	• •		
			is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Company)			
(Name of Corporation as currently filed with the	Florida Dept. of State)		
P14000085354			
(Document Number of Corporation ((if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation	adopts the following am	endment(s) to
A. If amending name, enter the new name of the corporation:			
		Sn th	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corne	oration name milst confi	new pation in the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable:	P.O. Box 827	77	9. 18 9. 18
(Mailing address MAY BE A POST OFFICE BOX)			
	New Smyrna E	Beach	
	FL 32170		
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the n	ame of the	
Name of New Registered Agent			
(Florida str	reet address)		
New Registered Office Address:	, Florid		
(City)		(Zip Code)	

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT Jo	hn Doe			
X Remove	<u>v</u> <u>m</u>	ike Jones		20	
X Add	<u>SV</u> <u>Sa</u>	lly Smith		2020 JAN 22 SECRETAR TALLAMA	maker maker
Type of Action Check One)	Title	<u>Name</u>	<u>Addres</u> s	22 AM 9:	
Change X Add Remove	SVD	Lara Brown	P.O. Box 827 New Smyrna B FL 32170	—————————————————————————————————————	
Change Add Remove					
Change Add Remove					
Change Add Remove	-				
Change Add Remove					
Change Add Remove					

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)	
		2020
		STOR LAND
		22
		- <u> </u>
		- FA 19
		
		
an amendment provides for an exchiprovisions for implementing the amen	nge, reclassification, or cancellation of issue dment if not contained in the amendment its	ed shares.
(if not applicable, indicate N/A)	The state of the same and the s	<u>sen.</u>
-		

The date of each a	mendment(s)	doption:		
Effective date <u>if a</u> j	pplicable:			
		(no more than	90 days after amendment file date)	 -
Adoption of Amen	dment(s)	(<u>CHECK ONE</u>)		
The amendment by the sharehold	(s) was/were ad lers was/were s	opted by the shareholders. The fficient for approval.	he number of votes cast for the amendme	
☐ The amendment must be separat	(s) was/were ap ely provided fo	proved by the shareholders the each voting group entitled to	rough voting groups. The following state ovote separately on the amendment(s):	SECRIE ALLAND
"The numb	er of votes cas	for the amendment(s) was/we	ere sufficient for approval	
by		(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	물 일 사람
		(voting group)		in o in
The amendments action was not re	(s) was/were ad equired.	pted by the board of director	s without shareholder action and shareho	older FL FATE
The amendment(action was not re	s) was/were ad quired.	pted by the incorporators wit	thout shareholder action and shareholder	
D	ated	116/2020	_ _ _	
Si	gnature		ah Can	
	(By a d	rector, president or other offi	icer - if directors or officers have not be	en
	selecte	i, by an incorposition — if in the ed fiduciary by that fiduciary	ne hands of a receiver, trustee, or other c	ourt
	ч рропі	ou inductary by that inductary	,	
		Jason	Braun	
			name of person signing)	
		P .		
		(Title of person	n signing)	