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ction porations		
Name of Limi	ted Liability Company	
Amendment and fee(s) are subr	mitted for filing.	
ndence concerning this matter t	to the following:	
Albert Wessels		
	Name of Person	
REDSTRAT LLC		
	Firm/Company	····
2316 Pine Ridge Rd, Suite	453	
	Address	
Naples, Florida 34109		
·	City/State and Zip Code	
albert@nafdof.com	to be used for future ennual report notific	ertion
		ationy
•	239 316-0700	
f Person	at () Area Code Daytime	Telephone Number
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•	T \$55 00 Elling Eq. Pr	□ \$60.00 Filing Fee,
Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	STREET/COURIE	
	Name of Limi Amendment and fee(s) are submodence concerning this matter of Albert Wessels REDSTRAT LLC 2316 Pine Ridge Rd, Suite Naples, Florida 34109 albert@nafdof.com E-mail address: (concerning this matter, please cancerning this matter, please cancerning this matter) Person the following amount:	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Albert Wessels Name of Person REDSTRAT LLC Firm/Company 2316 Pine Ridge Rd, Suite 453 Address Naples, Florida 34109 City/State and Zip Code albert@nafdof.com E-mail address: (to be used for future annual report notification and to the following amount: 330.00 Filing Fee & Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REDSRAT LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000153829	were filed on October 2, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable: 800 Seagate Drive, Suite 204		
(Principal office address MUST BE A STREET ADDRESS)	Naples, Florida 34103	
Enter new mailing address, if applicable:	2316 Pine Ridge Rd, Suite 453	
(Mailing address MAY BE A POST OFFICE BOX)	Naples, Florida 34109	
B. If amending the registered agent and/or registered o		1
registered agent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	
-	, Florida	
	City	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	Philippa Smit	800 Seagate Drive, Suite 204	Add
		Naples, Florida 34103	□ Remove
			☐ Change
MGR	Mike DePaolo	2800 Davis Blvd	
		Naples, Florida 34104	Remove
			☐ Change
MGR	Albert Wessels	800 Seagate Drive, Suite 204	Add
		Naples, Florida 34103	Remove
			□ Ad d Remove
			Change
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		·	□ Remove
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days aft Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	t ional) er filing.) Pursuant to 60: nis date will not be list	5.0207 (3)(b) ted as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 (b) The 90th day after the record is filed.	a.m. on the earli	er of:
Dated January 9 , 2017 . Signature of a member or authorized representative of a member		
V		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00