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RELANACSEE FLORIDA

OCT 6 2022 S. PRATHEF

COVER LETTER

	tration Section on of Corporations		
SUBJECT:	Red hunters L.L.C.		
SUBJECT:		nited Liability Company	
The enclosed A	rticles of Amendment and fee(s) are sul	bmitted for filing.	
Please return al	l correspondence concerning this matter	r to the following:	
	Mohammed Reda lahlou		
		Name of Person	
	Red hunters L.L.C		
		Firm/Company	
	4008 San Sebastián dr		
		Address	
	Kissimmee FL 34741		
		City/State and Zip Code	
	Rlahlou9@gmail.com	m (to be used for future annual report noti	
For further infor	rmation concerning this matter, please of	•	neation)
Mohammed Rec		646 6061444 at ()	
	Name of Person	Area Code Daytim	e Telephone Number
Enclosed is a ch	eck for the following amount:		
■ \$25.00 Filir	ng Fee Sand Status Sand 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Red hunters L.L.C.		UL 13 PH
	mnany as it now appears on our records	
(A Florida Limit	mpany as it now appears on our records.) led Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number 1.22000286203	any were filed on06/24/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City , Florida	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 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	Ouasa rechiche	4008 San sabastian dr. Kissimmee FL 34741	□ Add
			=Remove
			□Change
AMBR	Ouafa rechiche	4008 San sabastian dr. Kissimmee FL 34741	≡ Add
			□Remove
			□ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□Change
			□ Add
			□ Remove
			□Change

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an effective of the	date, if other than the date of filing:	ional) or filing.) Pursuant to 605.02 is date will not be listed
	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b	b) The 90th day after th
ecord spec is filed.		
is filed.		202 [2.1.1
is filed.	2022	2022 JI
is filed.	2022	2022 JUL I
is filed.	·	2022 JUL 13
is filed.	Signature of a member or authorized representative of a member	PH
is filed.	·	2022 JUL 13 PM 2: 11