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DIVISION OF CORPORATION

10 JUL 23 AM 10: 59

T. HAMPTON
JUL 2 8 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	ECT: RedLetter Group, LLC Name of Limited Liability Company
The er	nclosed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Name of Person
	Redletter Group, LLC
	1060 Homewood Blud, Unit J-103
	Delray Beach FL 33445 City/State and Zip Code eric Credletterpr. com E-mail address: (to be used for future annual report notification)
	E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
	FRIC HALEY at (561) 351-8814 Area Code & Daytime Telephone Number
Enclos	sed is a check for the following amount:
X \$2:	5.00 Filing Fee \$\ \begin{array}{c} \$30.00 Filing Fee & \begin{array}{c} \$\$55.00 Filing Fee & \begin{array}{c} \$\$\$50.00 Filing Fee & \begin{array}{c} \$\$\$\$60.00 Filing Fee, \\ Certificate of Status & \\ (additional copy is enclosed) \end{array}\$\$\$\$\$ Certified Copy (additional copy is enclosed) \end{array}\$\$\$\$\$\$\$\$\$\$\$\$\$

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

SECRETARY OF STATE OF CORPORATIONS

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 7/29/08 and assigned Florida document number 4866672949.

This amendment is submitted to amend the follo	wing:						
A. If amending name, enter the new name of	the limited liabil	ity company here:					
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company	," the designation '	'LLC" or the abbreviation			
Enter new principal offices address, if applica	ble:	1060 How	newood B	lud.			
(Principal office address MUST BE A STREET		_					
		Delray Be	ad, FL	33445			
Enter new mailing address, if applicable:		1060 Home	eunal Mu	ud.			
(Mailing address MAY BE A POST OFFICE E	Unit J-10	3	<u> </u>				
	.	Delray Bea	d FL 33	vd. 445			
		′					
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:							
	<u></u>	11					
Name of New Registered Agent:		HALEY					
New Registered Office Address:	1060 F	tomewall	Blud, Uni	+ 5-103			
•		Enter -	Florida street aa	dress			
	Delray 1	Beach	, 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> **Address** <u>Name</u> **Type of Action** Wellons, William B. □ Add Remove ☐ Add Remove ☐ Add ☐ Remove Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member ERIC HALEY
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00