1200032421

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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July 21, 2018

GABRIELE BRAHA 435 21ST STREET CU4 MIAMI BEACH, FL 33139

SUBJECT: RED USA LLC Ref. Number: L12000032421

. We have received your document for RED USA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Corporate Records Supervisor

Letter Number: 218A00015023

www.sunbiz.org

COVER LETTER

10:	Division of Corpo				
		RED USA Li	LC		
SUB.	JECT:	Name of Limit	ed Liability Company		
The o	enclosed Articles of A	mendment and fee(s) are subtr	sined for filing.		
Pleas	se return all correspon	dence concerning this matter to	the following:		
			GABRIELE BRAHA		
			Name of Person		
			RED USA LLC		
		- 	Firm Company		
•		4	35 21TH STREET CU4		
			Address		
•			Miami Beach 33139	·	
		. ,	City/State and Zip Code		
		E-muil address: (1	@redgroup.estate o be used for future annual r	eport notification	1
For	further information or	oncerning this matter, please ca	il:		
Gabriele Braha		at (536.2106		
	Name of	Person	Area Code	Daytime Telep	hone Number
Enc	losed is a check for th	ne following amount:			
	\$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	555,00 Filing Fee & Certified Copy radditional copy is enc	_	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (sadmonal 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 Taltabassee, Ft. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florids	ry Company as it now appear a Limited Liability Company)	s on our records.)	~
		02/07/2012	and assigned
lorida document numberL12000032421			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the lim	ited liability company he	ere:	
	11	to in the state of the state of	hben isting "L.I. C."
he new name must be distinguishable and contain the words "Lin	nited Liability Company, the c	esignation that of the a	7,20
Inter new principal offices address, if applicable:			
this amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".			
•			
Mailing address MAY BE A POST OFFICE BOX)			
n e dise mai	ictured office address 0	n aur records, enter	the name of the I
B. If amending the registered agent and/or registered agent and/or the new registered office ad-	istered office address o dress here:	n our records, <u>ente</u>	the name of the
 If amending the registered agent and/or registered agent and/or the new registered office adented. 	dress here:		ŗ
egistered agent and/or the new registered office ad-	dress here:		ŗ
Name of New Registered Agent:	GB SEVEN	INVESTMENTS LLC	·
Name of New Registered Agent:	GB SEVEN	INVESTMENTS LLC	,
Name of New Registered Agent:	GB SEVEN	INVESTMENTS LLC	,

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to uct 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

Title	<u>Name</u>	Address	Type of Action	
MGR	GABRIELE BRAHA	PO BOX 191862 MIAMI BEACH FL 33139		
 -			🏖 Remove	
			Change	
MGR	GB SEVEN INVESTMENTS LLC	PO BOX 191862 MIAMI BEACH FL 33139	DA Add	
			C Remove	
			Change	
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			□ Remove	
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			(onti	onal)		
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the record ) The 90th	specifies a delayed effective n day after the record is file	a.			r of:	
Dated	07/30/2018	_ ·	ilibralia			
1711CO <u></u>		/ jelle	Mon			
_	Signature of	a member or authorized rep	presentative of a member			
	Digital Co.	. =				
		GABRIELE BR				

Page 3 of 3

Filing Fee: \$25.00