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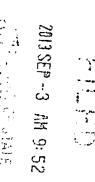
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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special instructions to	Filing Officer:	

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J. SAULSBERRY EXAMINER SEP 5 2013

COVER LETTER

TO: Registration Section
Division of Corporations

Red Dillard Street Holdings, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jackie Mahoney

Name of Person

Sabal Financial Group, LP

Firm/Company

4675 MacArthur Ct., 15th Floor

Address

Newport Beach, CA 92660

City/State and Zip Code

jackie.mahoney@sabalfin.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jackie Mahoney

949 255-2681

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of 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 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

Red Dillard Street Holdings, LLC				
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our imited Liability Company)	records.)		
The Articles of Organization for this Limited Liability Co	ompany were filed on July 16th	, 2012 and assi	and assigned	
Florida document number L12000091838	<u>_</u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability company here:			
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company," the	designation "LLC" or the al	bbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	(ESS)			
		, SE		
		🖒 🕹	.e 1	
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE BOX)			4 v r	
		11E 100		
B. If amending the registered agent and/or regist		ords, <u>enter the name o</u>	f the new	
registered agent and/or the new registered office add	ress here:			
Name of New Registered Agent:			.	
New Registered Office Address:	E El	: 1		
	Enter Flor	Enter Florida street address		
	City	_, Florida Zin 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	R. Patterson Jackson	4675 MacArthur Court	Add
		Suite 1550	Remove
		Newport Beach, CA 9266	0
MGR	Maureen Connaughton	4675 MacArthur Court	Add
		Suite 1550	Remove
		Newport Beach, CA 9266	0
MGR	Ron Warwick	4675 MacArthur Court	Add
		Suite 1550	Remove
		Newport Beach, CA 92660	<u>)</u>
MGR	Samuel Abraham	4675 MacArthur Court	Add
		Suite 1550	Remove
		Newport Beach, CA 92660)
			Add
			Remove
			Add 7
			Remove

D.	If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Da	ted	,
		&- run
		Signature of a member or authorized epresentative of a member
		KEVIH MCKENZIE
		Typed or printed name of signee
		Page 3 of 3

Filing Fee: \$25.00

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