L12000/47575

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

то:	Registration S Division of Co	ection rporations		
SUBJE	REDRUM			
SOBJI	ECT:	·	nited Liability Company	<u> </u>
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		DAN CHEN		
			Name of Person	
		PROUDLY SOURCING	LLC	
			Firm/Company	
		378 AHERN STREET		
			Address	
		ATLANTIC BEACH, FL	32233	
			City/State and Zip Code	
		DANA@PROUDLYSOUR		
		E-mail address: (to be used for future annual report notif	ication)
For furt	ther information c	oncerning this matter, please c	all;	
DAN C	CHEN		904 607-8703	
·	Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclose	d is a check for th	ne 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



REDRUM LLC

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

	(A Fiorida Finince Galiffity Company)	· LORION
The Articles of Organization for this Limited I Florida document number 1.12000147575	• •	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company he	<u>:re</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(BOX)	
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:		our records, enter the name of the nev
New Registered Office Address:	378 AHERN STREET	
New Neglatered Office Address.	Enter Flor	ida street address
	ATLANTIC BEACH	, Florida 32233
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	SAMUELLINN	857 NELSON STREET	
		JACKSONVILLE, FL 32205	Remove
			Change
MGR	GEORGE CUNNINGHAM	1610 COQUINA PLACE	■ Add
		ATLANTIC BEACH, FL 32233	Remove
			☐ Change
MGR	DAN CHEN	1610 COQUINA PLACE	. Add
		ATLANTIC BEACH, FL 32233	□ Remove
			Change
			A A Solikeniove
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ie: If the date inserted in the ument's effective date on the	is block does	not meet the app	licable statutory fil	ing requirements, th	is date will not be listed a:
record specifies a dela he 90th day after the			not an effective	time, at 12:01	a.m. on the earlier o
ed <u>08/18/17</u>		 ·	·		
		San Contract of the Contract o)		

Page 3 of 3

Filing Fee: \$25.00