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JUN 27 2013 J. BRYAN

COVER LETTER

TO:	Registration Section Division of Corporations	i			
SUBJEC	CT:	1604	LLC	9	
00202		Name of Limited	Liability Company	THE BUT	
				FILE PH BJUH 26 PH SECULIASSEE	
The encl	osed Articles of Amendme	ent and fee(s) are submi-	tted for filing.	State of the	ĺ
Please re	eturn all correspondence co	oncerning this matter to	the following:)
		Ke	in Geib	TALL ANIASSEE, FLORIDA	
			Name of Person	·	
			Firm/Company		
		3964	N Tanner RD Address		
		Mand	Sity/State and Zip Code Code)	
		4 2 2	City/State and Zip Code	- 1	
		E-mail address: to be	e used for future annual report notification	DD)	
For furth	er information concerning				
		Seib	at (467) 273 7 Area Code & Daytime Tel	094	
	Name of Person		Area Code & Daytime Tel	ephone Number	
Enclosed	/ i is a check for the following	ng amount:			
\$25.0		00 Filing Fee & rtificate 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

				30 6	
(<u>Name of the Limited Lial</u> (A Flor	1604	/		5000	2
(Name of the Limited Lial	bility Company as i	t now appears on o	our records.)		!
				93	يو
The Articles of Organization for this Limited Liabil	ity Company were	filed on	5/16/13	2 and assigne	d
Florida document number	71720				
This amendment is submitted to amend the following	ıg:				
A. If amending name, <u>enter the new name of the</u>	limited liability c	ompany here:			
	Save				
The new name must be distinguishable and end with the "L.L.C."		ability Company," t	he designation "L	LC" or the abbre	viation
Enter new principal offices address, if applicable	: _5	ame,			
(Principal office address MUST BE A STREET A	DDRESS)	396	f N Tan	ner Rel	
		ame, 3961	ando It	32826	
Enter new mailing address, if applicable:		Same as	above	-	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>				
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office a address bere:	ddress on our re	ecords, <u>enter t</u>	ne name of the	e new
registered agent and/or the new registered office	address nere.				
Name of New Registered Agent:	(Same) 396	Kevi	n Gei	b	
New Registered Office Address:	396	V Al Tan	auga Ra	1	
New Registered Office Address.		Enter Flo	orida street addr	ess	
	od and	Enter Flo	, Florida	32826	
_	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 which Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member					
	MGR = Man MGRM = Ma	ager anaging Member	P. P	No. Comments		
1 / M	<u>Title</u>	Type of Action				
16R	Florida	Red Estate Enterprises, LLC	3964 N Tanner Rd	_ Add		
		· -	Mando Fl 32826	Remove		
			· · · · · · · · · · · · · · · · · · ·	·		
	MGR	Kerty Geib	3964 N Tanner Rd Mando Fl 32826	Add		
			Mando 7/32826	Remove		
		-		-		
				Add		
		-		Remove		
		-				
				Add		
		-		Remove		
		-				
				Add		
		-		Remove		
		-				
	 			Add		
		-		Remove		

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	No Change	1
	Total Posts	B W
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		્રે. જુ જુ
Dated	6/15/13.	50°
	X Kenn Lil	
	Signature of a member or authorized representative of a member	<del>_</del>
	Kein Geib	
	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00