14000029573

	(Requestor's Name)
	(Address)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
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-1 PH 3: 31

of 13/12025

COVER LETTER

SUBJECT:	Redfoxes Re	al Estate Holdings, LLC		
SOBJECT;		Name of Limi	ted Liability Company	
The enclosed	Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Please return	all correspon	dence concerning this matter (to the following:	
		Randal C. Fairbanks, Esq.		
			Name of Person	
		Brennan Manna Diamond I	P.L.	
			Firm/Company	· <u> </u>
		5210 Belfort Road, Suite 4	00	
	Address			
		Jacksonville, Florida 32256	6	
		ufaidh anlea©huadal a an	City/State and Zip Code	
		rfairbanks@bmdpl.com E-mail address: (0	to be used for future annual report noti	fication)
For further in	nformation co	ncerning this matter, please ca	•	,
Felicia O. F	ox		904 346-0050 at ()	
	Name of	Person	Area Code Daytin	e Telephone Number
Enclosed is a	a check for the	e following amount:		
□ \$25.00 I	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

TO:

Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Redfoxes Real Estate Holdings, LLC

company has been notified in writing of this change.

FILED

2022 DEC - 1 PM 3: 48

(Name of the Limi	ted Liability Company as it now appears (A Florida Limited Liability Company)	TALLAHASSEE, FL
The Articles of Organization for this Limited L	iability Company were filed on Febr	nary 20, 2014 and assigned
Florida document number 1.14000029573	·	
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	of the limited liability company her	<u>e</u> :
Redfoxes Development, LLC		
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE		
B. If amending the registered agent and/or		eords, enter the name of the new registered
agent and/or the new registered office addre	ess nere:	
Name of New Registered Agent:	Felicia O. Fox	
Name of New Registered Agent.		
New Registered Office Address:	3128 River Vale Court	la street address
	Jacksonville City	, Florida 32207 Zip Code
N. D. da at Assarba Olandana Makanalana Afakanalan	•	Top Colle
New Registered Agent's Signature, if changing		
I hereby accept the appointment as register provisions of all statutes relative to the pro-	red agent and agree to act in this c	apacity. I further agree to comply with the
accept the obligations of my position as reg	gistered agent as provided for in C	hapter 605, F.S. Or, if this document is
being filed to merely reflect a change in the	e registered office address, I hereb	econfirm that the limited liability

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael D. Fox	3128 River Vale Court	
		Jacksonville, Florida 32207	■Remove
			□Change
			□Add
			□Remove
			Change
			Remove
		·	Change
			DAdd
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If an effective dat <u>Note:</u> If the da	e, if other than the te is listed, the date mu- ate inserted in this bi- fective date on the D	st be specific and ca lock does not mee	et the applicable	ite of filing or more th statutory filing req	(optional) an 90 days after filing.) P uirements, this date w	ursuant to 605.020
e record specifind is filed.	es a delayed effectiv	/e date, but not an	effective time,	at 12:01 a.m. on th	e earlier of: (b) The	90th day after the
Dated	30/22 ()			,		
	<u> </u>	WW Y	W	d representative of a	momber	
	H	Signature of a title	inder wi authorize	a representative of a	nemou	

Filing Fee: \$25.00