



**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** REDBIRD INDUSTRIES 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:

TRISHA BAILEY  
Name of Person  
REDBIRD INDUSTRIES LLC  
Firm/Company  
11555 Central Pkwy, Ste. 903  
Address  
JACKSONVILLE, FL 32224  
City/State and Zip Code  
TRISHA.REDBIRD@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

FILED  
16 JAN 11 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

TRISHA BAILEY  
Name of Person at (904) 591-5811  
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

REDBIRD INDUSTRIES LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/25/2014 and assigned Florida document number L14000181919.

This amendment is submitted to amend the following:

**A. 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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11555 Central Pkwy, Ste. 903

JACKSONVILLE, FL 32224

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Trisha Bailey

New Registered Office Address:

11555 Central Pkwy, Ste. 903

*Enter Florida street address*

Jacksonville

*City*

Florida 32224

*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, 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MCKELLOP, PHILLIP J	3545 ST JOHNS BLUFF RD SO.	<input type="checkbox"/> Add
		STE 1 PMB #152	<input checked="" type="checkbox"/> Remove
		JACKSONVILLE, FL 32224	<input type="checkbox"/> Change
MGR	Verso Wealth Strategists	11555 Central Pkwy, Ste. 903	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32224	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BAILEY, TRISHA A	3545 ST JOHNS BLUFF RD SO.	<input type="checkbox"/> Add
		STE 1 PMB #152	<input checked="" type="checkbox"/> Remove
		JACKSONVILLE, FL 32224	<input type="checkbox"/> Change
MGR	TBL FINANCIAL GROUP	11555 Central Pkwy, Ste. 903	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32224	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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