*L15000088612

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2015 JUL -9 PM 1: 25

K.SALY EXAMINER JUL 13 2015

COVER LETTER

TO: R	egistration Sec ivision of Corp	ction · corations			
OUD IE OT		SERVICES, LLC			
SUBJECT	:	Name of Limited Liability Company			
The enclos	ed Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please retu	rn all correspor	ndence concerning this matter t	to the following:		
		Ryan Cipparone, Esquire			
			Name of Person		
		Cipparone & Cipparone, P.	Α.		
			Firm/Company		
		1540 International Parkway	y, Suite 1060		
			Address		
		Lake Mary, Florida 32746			
			City/State and Zip Code		
		RCipparone@CipparonePA	.com to be used for future annual report notific		
For further	information co	oncerning this matter, please ca	·	auon)	
Ryan Cipp	arone		321 275-5914 at ()		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed i	s a check for th	e 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:

TO:

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

ZOIS JUL -9 PM 1:25

TALLAHASSEF, TLORING

REDSPOT SERVICES, LLC

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

(A Florida Limited Liability Company)

(A Fordu Emmod F	Succession Company)	CORIO		
The Articles of Organization for this Limited Liability Company Florida document number L15000088612	were filed on May 19, 2015	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	2405 Alaqua Drive			
(Principal office address MUST BE A STREET ADDRESS)	Longwood, Florida 32779	<u></u>		
Enter new mailing address, if applicable:	N/A			
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	· —	ter the name of the		
Name of New Registered Agent:				
New Registered Office Address:		**· · · · · · · · · · · · · · · · · · ·		
	Enter Florida street address			
·	, Florida			
	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 or removed	g Authorized Person(s) authorized to n from our records:	nanage, <u>enter tl</u>	ne title, name, and address of eac	h person being added
	Ianager Authorized Member		FILED 2015 JUL -9 PM 1:25 FALLAHASSEE, FI DANDE	
<u>Title</u>	<u>Name</u>	Address	SECRETARY	Type of Action
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ctive date, if other than effective date is listed, the date	the date of filing:	not be prior to date o	f filing or more than 90 c	_ (optional) lays after filing.) Pursuant to	605
e: If the date inserted in thus ument's effective date on the	is block does not meet	the applicable stat	tutory filing requirement	ents, this date will not be	liste
uniem s'enecuve date on d	to Department of State	a records.			
record specifies a dela	ved effective date	, but not an el	ffective time, at 1	.2:01 a.m. on the ea	arlie
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Filing Fee: \$25.00