115000190903

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700279514697

12/04/15--01012--008 **25.00

SECRETARY OF STATE

DEC 0 7 2015

A II: 56

3 MASON

COVER LETTER

D.F.		1100110			
SUBJECT:	EDBALLY	HOO LLC			
		Name of Limited Liability Company			
The enclosed Ar	ticles of A	mendment and fee(s) are submitted for filing.			
Please return all	correspond	dence concerning this matter to the following:			
		SANDRA K HAAB			
		Name of Person	· <u>·······</u>		
		KEYS ACCOUNTING & TAX SERVICE			
		Firm/Company			
		PO BOX 1578			
		Address			
		KEY LARGO, FL 33037			
		City/State and Zip Code			
		SANDI@KEYSACCOUNTING.COM			
		E-mail address: (to be used for future annual repo	rt notification)		
For further infor	mation cor	acerning this matter, please call:			
SANDRA K HA	AAB		64, X203		
	Name of I	erson at ()	Daytime Telephone Number		
Enclosed is a ch	eck for the	following amount:			
■ \$25.00 Filin		☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

				- 1			
REDBALLYHOO LLC				Œ	E S.		
(Name of the Limited Liability Company as it now appears on our records.)							
	Liability Company)	Y OF S	Τ				
The Articles of Organization for this Limited I.	were filed on 11/10/15	15. 15. 15. 15. 15. 15. 15. 15. 15. 15.	A ::	and assigned			
Florida document number L15000190903			: 5 b				
This amendment is submitted to amend the following	owing:						
A. If amending name, enter the new name o	f the limited liab	ility company here:					
The new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the designation	"LLC" or the	abbrev	iation "L.L.C"		
Enter new principal offices address, if applic	99411 OVERSEAS HIGHWAY, STE 4						
(Principal office address MUST BE A STREE		KEY LARGO, FL 33037					
Enter new mailing address, if applicable:	PO BOX 370864						
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	KEY LARGO, FL 33037					
B. If amending the registered agent and registered agent and/or the new registered or			cords, <u>ent</u>	er the	name of the nev		
Name of New Registered Agent:	SANDRA K HAAB						
New Registered Office Address:	99411 OVERS	EAS HIGHWAY, STE 4			<u> </u>		
		Enter Florida street a	ıddress				
	KEY LARGO		_, Florida	33037			
	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.

Mandre K Hack M 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>		Type of Action
MGR	DANIEL CASANAS	PO BOX 373195		□ Add
		KEY LARGO, FL 33037		□ Remove
		<u> </u>		Change
				Remove
				Change
				🗆 Add
				Remove
				Change
				□ Add
				Remove
				Change
				🗆 Add
				🗆 Remove
			1855 1 3 7 4 8 m	Change
			1355 11-036 11-036	D Add
		•	ELECTION A III SE	□ Remove
				Change

amending any other	r information, enter c	hange(s) here: (Attach o	additional sheets, if	necessary.)	
·					
		<u> </u>			
	 _				
	· · · · · · · · · · · · · · · · · · ·				
		· · · · · · · · · · · · · · · · · · ·			
			····		
			<u> </u>		
					<u>.</u>
		_			
		-			
	W 78	1,500			
	_				
ote: If the date inserte	r than the date of filin the date must be specific and in this block does not a te on the Department of	g:	ng or more than 90 days ry filing requirements	optional) after filing.) Pursuan s, this date will not	to 605.020 be listed a
	a delayed effective or the record is filed.	date, but not an effec	tive time, at 12:	01 a.m. on the	earlier o
NOVEMBER 30	, 2015				
		11	\supset		
·	Signature of a	member or authorized represe	entative of a member	Constant	
	N	0.000.100		ES ES	- Trans
	DANIEL	CASA NAS Typed or printed name of si	gnee		· · · ·
		Page 3 of 3		1013 ==	
		0	_	05 105 105 105 105 105 105 105 105 105 1	

Filing Fee: \$25.00