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(City/State/Zip/Phone #)

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08/26/13--01014--001 **25.07

2013 AUG 26 PM 2:03
CLERK'S OFFICE
ILLINOIS STATE PLANT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REDMAN HOME TEAM, LLC

Name of Limited Liability Company

2018 AUG 26 PM 4
RECEIVED
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GILLIAN REDMAN

Name of Person

REDMAN PROPERTY GROUP, LLC

Firm/Company

1184 S. GRAND HIGHWAY

Address

CLERMONT, FL 34711

City/State and Zip Code

GILLIAN@REDMANHOMETEAM.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GILLIAN REDMAN

863

521-7329

at ()

Name of Person

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**

REDMAN HOME TEAM, LLC

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

2018 AUG 26 PM 4
FILED
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/01/2016 and assigned
Florida document number L15000208972.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

REDMAN PROPERTY GROUP, LLC

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)

1184 S GRAND HIGHWAY

CLERMONT, FL 34711

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1184 S GRAND HIGHWAY

CLERMONT, FL 34711

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

Name of New Registered Agent:

GILLIAN REDMAN

New Registered Office Address:

1184 S GRAND HIGHWAY

Enter Florida street address

CLERMONT

City

Florida 34711

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 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	GILLIAN I. REDMAN	309 N LAKESHORE BLVD	<input type="checkbox"/> Add
		HOWEY IN THE HILLS, FL 34737	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	PAUL W. REDMAN	33317 LAKESHORE DRIVE	<input type="checkbox"/> Add
		TAVARES, FL 32778	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(i)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.


Signature of a member or authorized representative of a member

Typed or printed name of signee