L16000127358

| (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: |
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| |

Office Use Only



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2019 DEC 23 AM 8: 46 SECRETARY OF STATE

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

| Division of Co | rporations | | |
|---------------------------|--|---|---|
| RedZone | Realty LLC | | |
| SUBJECT: | Name of Lin | nited Liability Company | <u> </u> |
| | | | |
| The enclosed Articles of | Amendment and feers) are suf | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | Hayley Miller | | |
| | | Name of Person | |
| | RedZone Realty LLC | | |
| | | Firm/Company | |
| | 13705 Beach Blvd | | |
| | | Address | |
| | Jacksonville, FL 32224 | | |
| | | City/State and Zip Code | |
| | hayley'@redzonerg.com | | |
| | | to be used for future annual report not | ification) |
| For further information, | concerning this matter, please c | all: | |
| Hayley Miller | | 904 414-2900 | |
| Name o | rt Person | Area Code Daytin | ie l'elephone Number |
| Enclosed is a check for t | he 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 Addres | <u>881</u> | Street Address: | |
| Registration Section | | Registration Se | ection |
| Division of C | | Division of Co | |
| P.O. Box 632 | ! / | The Centre of 1 | Fallahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| RedZone Realty LLC | |
|--|--|
| (Name of the Limited 1 (A.I. | iability Company as it now appears on our records.) londa Limited Liability Company) |
| The Articles of Organization for this Limited Liabil | lity Company were filed on 07:05/2016 and assigned |
| Florida document number L16000127358 | · |
| This amendment is submitted to amend the following | าดี: |
| A. If amending name, enter the new name of the | |
| The new name must be distinguishable and contain the words | "Limited Liability Company," the designation "LLC" or the abbreviation "LLC". |
| Enter new principal offices address, if applicable | e man and a second a second and |
| (Principal office address MUST BE A STREET A | DDRESS) |
| Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOY | <u> </u> |
| B. If amending the registered agent and/or regis agent and/or the new registered office address he | tered office address on our records, <u>enter the name of the new registered</u> ere: |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| _ | , Florida |
| | City Zin 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---------------|--|--------------------|
| VP | Candice Moody | | □Add |
| | | 13705 Beach Blvd, Jacksonville, FL 32224 | ■Remove |
| | | | □Change |
| | | | □Add |
| | | TALL ASIA | Remove 2019IDEC 23 |
| | | So on the second | A Premove 5 Change |
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| | | | □Remove |
| | | | Change |

| | are wanting to amend our main address and remove Candice Moody from our business. | |
|----------------------|--|------|
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| ffant: | date, if other than the date of filing: | |
| an eff | e 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. | 020 |
| <u>cote:</u> ocum | he date inserted in this block does not meet the applicable statutory filling requirements, this date will not be liste is effective date on the Department of State's records. | d a: |
| | | |
| recor | pecities a delayed effective date, but not an effective time, at 12:01 a.m., on the earlier of: (b) The 90th day after | the |
| Lis fil | | |
| | cember Seventeenth 2019 | |
| ated | | |
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| | agnature of a member or authorized representative of a member | |
| | | |
| | | |

Filing Fee: \$25.00