L17000 116827

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(ria	aicoo,	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
<u>(Do</u>	cument Number)	
(50	outhern rambers	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	_	



700305657367

11/20/17--01026--005 **60.00

Office Use Only

COVER LETTER

TO:		tration Sect on of Corpo										
SUBJE	CT:	Redne	.ck	Certifie	ed	Brai	nd L	_L_C				
		_		Name of	Limited	d Liability (Company					
The end	losed A	articles of A	mendme	nt and fee(s) are	submi	itted for file	ing.					
Please r	eturn al	l correspond	l e nce co	ncerning this ma	tter to	the follow	ing:					
				Ku le	۱ ک	News						
						Name o	of Person					
				New	1200	ducti Fim/C	on Ll	<u> </u>		<u> </u>		
						T IIIID C	отрану					
			40	05 N	\sim	Gth	Stree	, †	Unit	A	ì	
						Add	iress					
			Go	cylemn E-mail addre	e .	FL	324	o 0°	1			
						City/State a	nd Zip Code					- •
				cylemn	وبين	Q 9,	mail.	CO	m			
				E-mail addre	ss: (to l	be used for	future annual	report	notification)			
For furt	her info	rmation con	cerning	this matter, pleas	se call:	:						
	IZ.	lo r	مار								-	
	<u>n</u> ,	Name of P	erson	<u> </u>		at (<u>552</u>)		φ 3 - O	065	<u> </u>	<u> </u>
			4.55			A.I.	ca Couc	Day	ume rerepi	one vui	mber	3
Enclose	d is a cl	neck for the	followin	g amount:								
□ \$ 25	.00 Fili	ng Fee		00 Filing Fee & rtificate of Status	S	Certif	Filing Fee & ied Copy mal copy is end		Þ	Certi Certi	fied Cop	Status &
		MAILIN	CADD	DECC.				m (

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

Redneck Certified (Brand LLC
(Name of the Limited Liability Compa (A Florida Limited L	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000116827</u>	were filed on 5/26/17 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
New Production LLC	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4605 NW 6th Street Unit A
(Principal office address MUST BE A STREET ADDRESS)	Gainesville, FL 32609
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4605 NW 6th Street, Unit A Gainesville, FL 32609
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zip Code
	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			□ Add
			Remove
			Change
			□ Remove
			Change
			Remove
			☐ Change
			Remove
			Change
			Remove
			☐ Change

-	
-	
-	
-	
_	
-	
-	
-	
_	
_	
_	
_	
_	
_	
ce	ive date, if other than the date of filing: Date Of Filing (optional) ective 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 If the date inserted in this block does not meet the applicable stanton of filing or more than 90 days after filing.) Pursuant to 605.020
Hecti	ective 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 605.02
	ent's effective date on the Department of State's records.
ocum	ent's effective date on the Department of State's records.
ocumo	ent's effective date on the Department of State's records.
e rec	ent's effective date on the Department of State's records.
e rec The	ent's effective date on the Department of State's records.
e rec The	ent's effective date on the Department of State's records. Ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
e rec The	ent's effective date on the Department of State's records. Ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.

Page 3 of 3

Filing Fee: \$25.00