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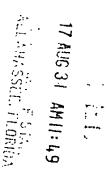
(Requestor's Name)				
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## **COVER LETTER**

T(): Registration Section Division of Corporations	
SUBJECT: REDE REDAY LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Bruce J. Cerneaux	
Rebel Rebar LLC	
10230 GUZMAN AVC.	
HASTINGS F1 32145 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Bruce Comeaux at 386 972-8126  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25,00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee. \$\Bigcup \$60.00 F	

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

REBEL RE	bar LLC
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C	, and the state of
Florida document number <u>L. 1700 O 16 232</u> 3	<u> 2</u> .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi $ ullet' \setminus \dot{\gamma}$	ted liability company here:
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDR	(ESS) $(f)$
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	NA
registered agent and/or the new registered office add	tered office address on our records, enter the name of the new ress here:
Name of New Registered Agent:	A/\n\ SE = [-
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 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>	Name	Address	Type of Action
<u>Ambr</u>	Bruce Comeaux	10230 GUZMAL AVE.	Add
		10230 GUZMAR AVE. HASTING: F1 32145	□ Remove
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(If an ef Note:	ive date, if other than the date of filing:	ing.) Pursuar		
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.r 90th day after the record is filed.	n. on the	earlie	er of:
Dated	Acquist 28 . 2017.  Bruss D. Corneau  Signature of a thember or authorized representative of a member			
	Bruce J. Comeaux Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00