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O SIMMONS DEC 1 9 2018

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Redp	oint Realty Name of Limi	LLC ted Liability Company	
The enclosed Articles of A	amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	Jason	Myer S Name of Person	
	<u>kedps</u>	int Realty LLC	
		Address	
	Orlando	City/State and Zip Code	
	myers 2009 (E-mail address: (6	o Relised for future annual report notific	eation)
For further information co	ncerning this matter, please ca		
Rashaun Ty Name of	Person	at (<u>407</u>) <u>402 - 1</u> Area Code Daytime	1961 Telephone Number
Enclosed is a check for the	e following amount:	ment and fee(s) are submitted for filing. concerning this matter to the following: Jason	
\$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

Reapoint (Name of the Limited L	Lea H	LLC iv as it now appears of iability Company)	n our records.)	
(A) The Articles of Organization for this Limited Liabi Florida document number <u>L17660 2299</u>	lity Company			and assigned
This amendment is submitted to amend the following	ng;			
A. If amending name, enter the new name of the	e limited liabi	lity company here	:	
The new name must be distinguishable and contain the words	s "Limited Liabili	ty Company," the desig	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A			Varcoossee FL 32832	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>		arcossec 1. FL 32835	Rd 2 #168
B. If amending the registered agent and/or registered agent and/or the new registered office			ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Jason	Myers		
New Registered Office Address:	11954	Narcoossee	fd 2 #10	68
_	Orlando	City	, Florida	32832 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> <u>Address</u> Type of Action <u>Name</u> Rashaun Tyles _ 🗆 Add 🗠 🗆 Change <u>-</u>□ Add ☐ Remove -_ Change □ Add ☐ Remove _□ Change _□ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove _____ Change

							
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te: lf	e date, if other tha tive date is listed, the da the date inserted in t it's effective date on	his block does not r	a cannot be prior meet the applica		nore than 90 days aft		
	rd specifies a de Oth day after the			t an effective t	time, at 12:01	a.m. on th	e earlier
امد	December						
.eu _		Signature of a	(L)				

Page 3 of 3

Filing Fee: \$25.00