## 17000251450

| (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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9/13/2017

## **COVER LETTER**

| TO: Registration Se<br>Division of Cor |  |   |   |
|--|--|---|---|
| SF Constru                             | ection LLC                                   |   |   |
| SUBJECT:                               | Name of Lin                                  | nted Liability Company  |   |
| The enclosed Articles of               | Amendment and fee(s) are sub                 | amittad for filing  |   |
|  | ondence concerning this matter               | -   |   |
|  | Gary Bloome                                  |   |   |
|  |  | Name of Person  |   |
|  | Gary Bloome PA                               |   |   |
|  |  | Firm/Company  |   |
|  | 9148 Glades Road                             |   |   |
|  |  | Address   |   |
|  | Boca Raton, FL 33434                         |   |   |
|  |  | City/State and Zip Code   |   |
|  | gbloome [@gmail.com<br>E-mail address: (     | to be used for future annual report no                              | tification)   |
| For further information c              | concerning this matter, please c             | ·   | ,   |
| Gary Bloome                            |  | 561 477-8099  |   |
| Name o                                 | f Person                                     | Area Code Daytis  | me Telephone Number   |
| Enclosed is a check for the            | 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,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
| Mailing Address                        |  | Street Address:   |   |
| Registration 5                         | Section                                      | Registration Se   | ection  |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Red Door Development LLC   |  |                                       |
|--|--|---------------------------------------|
| (Name of the Limited Liability Company :<br>(A Florida Limited Liab  | as it now appears on our record ility Company) | <u>s.</u> )                           |
| The Articles of Organization for this Limited Liability Company we Florida document number $\frac{L17000251450}{L17000251450}$ . | re filed on 12/07/2017                         | and assigned                          |
| This amendment is submitted to amend the following:  |  |                                       |
| A. If amending name, enter the new name of the limited liability   | y company here:                                |                                       |
| 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)  |  | · · · · · · · · · · · · · · · · · · · |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  |  |                                       |
| B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:            | ress on our records, <u>enter</u>              | the name of the new registe           |
|  |  | , b                                   |
| Name of New Registered Agent:  | <del></del>                                    | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   |
| New Registered Office Address:   |  | F: 00                                 |
|  | Enter Florida street address                   |                                       |
|  |  | orida                                 |
|  | 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 t 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 a or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>        | Address              | Type of Action |
|--------------|--------------------|----------------------|----------------|
| AMBR         | Angelo Stratigakis | 19567 Estuary Dr     | ■Add           |
|              |                    | Boca Raton, FL 33498 | □Renюve        |
|              |                    |                      | □ Change       |
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| Personalis data is allowed as allowed  | 2.4. of 5P  |                                     |
| Effective date, if other than the If an effective date is listed, the date mu. Note: If the date inserted in this bidocument's effective date on the D | st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant lock does not meet the applicable statutory filing requirements, this date will not | t to 605.0207 (.<br>be listed as tl |
| e record specifies a delayed effectived is filed.  | re date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th da  | iy after the                        |
| Dated August 30  | 2021  |                                     |
| Techa !  | etter   |                                     |
| 0  | Signature of a member or authorized representative of a member  |                                     |
| Megha Ratta  |   |                                     |
| <del></del>  | Typed or printed name of signee   |                                     |

Filing Fee: \$25.00