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VS.



August 11, 2018

CODY GENSIEJEWSKI 205 S NEW JERSEY AVE #A TAMPA, FL 33609

SUBJECT: RED DAGGER LLC Ref. Number: L18000181546

We have received your document for RED DAGGER LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 918A00016597

Octavia L Simmons Regulatory Specialist III

FC: The UC 23 KHIO: FG

COVER LETTER

TO: Registration Sec Division of Corp			
Red Dagge			
SUBJECT:		ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Cody Gensiejewski		
		Name of Person	
	Red Dagger LLC	Name of Limited Liability Company and fee(s) are submitted for filing. Ining this matter to the following: Insiejewski Name of Person Ger LLC Firm/Company W Jersey Ave #A Address L 33609 City/State and Zip Code gmail.com E-mail address: (to be used for future annual report notification) matter, please call: 1863 1669-6911 214 215 216 2160.00 Filing Fee,	
		Firm/Company	
	205 S New Jersey Ave #	Name of Limited Liability Company Int and fee(s) are submitted for filing. Incerning this matter to the following: Gensiejewski Name of Person Dagger LLC Firm/Company New Jersey Ave #A Address a, FL 33609 City/State and Zip Code ej@gmail.com E-mail address: (to be used for future annual report notification this matter, please call: at (
		Address	•
	Tampa, FL 33609		
		City/State and Zip Code	
	cgensiej@gmail.com	10.00	
	•	•	cation)
For further information co	ncerning this matter, please ca	ill:	
Cody Gensiejewski			
Name of	Person		Telephone Number
Enclosed is a check for the	c following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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 ARTICLES OF ORGANIZATION **OF**

Red Dagger LLC

	(A Florida Limited	iny as it now appears on our Liability Company)		
The Articles of Organization for this Limited L. Florida document number L18000181546	iability Company	were filed on <u>07/30/20</u>	and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:	1 18	
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "LL.C."	
Enter new principal offices address, if applicable:		205 S New Jersey Ave #A		
Principal office address MUST BE A STREE	ET ADDRESS)	Tampa, FL 33609		
		205 S New Jersey Av	- 日本 日本 日本 日本 日本 日本 日本 日本 日本 日本 日本 日本 日本 日	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Tampa, FL 33609		
3. If amending the registered agent and, egistered agent and/or the new registered o			ecords, enter the name of th	
Name of New Registered Agent:	Cody Gensiej	ewski 		
	Cody Gensiejo 205 S New Je			
Name of New Registered Agent: New Registered Office Address:			t address	
		rsey Ave #A	t address , Florida 33609	

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 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	<u>Address</u>	Type of Action
MGR	Cody Gensiejewski	205 S New Jersey Ave #A	
		Tampa, FL 33609	□ Remove
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			Change
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an effective date is listed	, the date must be	specific and canno	ot be prior to date of	filing or more than 90	(optional) days after filing.) Pursuant to	605.02
ote: If the date insert cument's effective date	ea in this block	does not meet ti	ne applicable statu	tory filing requirem	ents, this date will not be	listed a
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record specifies	a delaved ef	fective date.	but not an effi	ective time. at :	12:01 a.m. on the ea	arlier -
The 90th day afte				,		
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Filing Fee: \$25.00

Typed or printed name of signee