## L18000359410

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phor	ne #)
<u></u>	wait	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		5/11/21 TM

Office Use Only



700361773047

03/22/21--01025--014 \*\*25.00

21 MAR 22 PH 3: 54

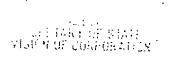
## **COVER LETTER**

TO:	Registration S Division of Co	ection rporations	•	•
SUBJE	Redfox Pro	omo. LLC	,	
	o <u></u> -	Name of Lin	nited Liability Company	-
		Amendment and fee(s) are sub	<u>.                                    </u>	<i></i>
Please re	aurn all correspo	ondence concerning this matter	to the following:	
		Tracy Stein		
			Name of Person	
		Redfox Promo, LLC		
			Firm/Company	
		127 West Fairbanks Avenu	ue #175	
			Address	<del></del>
		Winter Park, FL 32789		
		tracy@redfoxpromo.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report noti	fication)
For furth	er information c	concerning this matter, please c	all:	
Tracy St	ein		407 616-8859	
	Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed	is a check for th	he following amount:		
<b>■</b> \$25.0	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 Address: 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



21 HAR 22 PH 3: 55

Redfox Promo, LLC

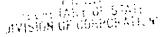
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L18000259410			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company he	re:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the de	signation "LLC" or the a	hbreviation "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	addraw an aug vo	aoudo untur tha rus	
agent and/or the new registered office address here:	address on our re	cords, enter the nan	ie of the new registe
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	da street address	
		, Florida	
			Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		

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 21 MAR 22 PM 3: 55 Title Name **Address** Type of Action MGR Emly Stopp 6131 Metrowest Blvd, #111 \_\_\_\_ 🗆 Add Orlando, FL 32835 \_\_ \_ **=** Remove AMBR Prime Pinnacle, LLC 127 West Fairbanks Avenue #175 Winter Park, FL 32789 \_\_\_\_\_ 🗆 Remove MGR Prestige Management Group, LLC 127 West Fairbanks Avenue #175 \_\_\_\_ 💻 🗒 Add Winter Park, Fl. 32789 \_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_ □ Add \_\_\_\_\_ Remove \_\_\_\_\_ □Change \_\_\_\_\_ □Add \_\_\_\_\_ □Remove

Authority is Memb					
	•				
	•				<del></del>
					<del></del>
			_		
			<u> </u>		
<u> </u>				·	
<del></del>					
<del></del>		<del></del> -		<del>-</del>	
· · · · · · · · · · · · · · · · · · ·					<del></del> -
			<del></del>		
	<del></del> _	<del></del>		<u></u>	
t does not meet the	e applicable	ite of filing or mostatutory filing	ore than 90 days	after filing 3 Pu	rsuant to 605.0207 I not be listed as
ate, but not an effe	ective time, a	at 12:01 a.m. c	on the earlier o	f: (b) The 90	th day after the
2021	1				
nature of a member	Muthorized	1 representative	of a member		<del></del>
	e specific and cannot does not meet the artment of State's ate, but not an effective does not are effective does not an effective does not an effective does not an effective does not are effective does no	especific and cannot be prior to de does not meet the applicable rement of State's records.  ate, but not an effective time,	especific and cannot be prior to date of filing or mot does not meet the applicable statutory filing rument of State's records.  ate, but not an effective time, at 12:01 a.m. to	especific and cannot be prior to date of filing or more than 90 days to does not meet the applicable statutory filing requirements artment of State's records.  ate, but not an effective time, at 12:01 a.m. on the earlier of the carrier of the car	especific and cannot be prior to date of filing or more than 90 days after filing.) Put does not meet the applicable statutory filing requirements, this date will retire to f State's records.  ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90

Filing Fee: \$25.00