(R	equestor's Name)			
	ddress)		0321265260	
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# ANSBACHER LAW

CONDOMINIUMS + HOMEOWNER ASSOCIATIONS REAL ESTATE + CONSTRUCTION + PERSONAL INJURY

3509 U.S. Highway 17 Fleming Island, FL 32003 904.385.3444

Suite 100 Jacksonville, FL 32217 904.7.37.4600

Sunce and St. Augustine, FL 32084 904.429.4833

8818 Goodbys Executive Drive 1100 South Ponce de Leon Boulevard 389 Palm Coast Parkway SW, Suite 4 Palm Coast, FL 32137 386.524.4327 by appointment only

VIA UPS 2-DAY: 1ZFF23890294274960

December 3, 2018

**Registration Section Division of Corporations** 2661 Executive Center Circle **Clifton Building** Tallahassee FL 32301

# **RE: Reed Investment Partners, LLC Our File No.: 180489**

Dear Sir/Madam:

Enclosed please find our check in the amount of \$25.00 for filing Articles of Amendment to Articles of Organization for Reed Investment Partners, LLC. This amendment is being filed to correct the Principal Address, Mailing Address and Member Address from 423 FOREST MEADOW LANE, ORANGE PARK FLORIDA 32065;

9526 Argyle Forest Blvd. TO: **B2-121** ORANGE PARK, FL 32222.

Please stamp the duplicate copy of the above described instruments and return to us in the enclosed self-addresses stamped envelope.

Sincerely, 1(C, c) \_\_\_\_ Sandra L. Morgan Legal Assistant

{BBA Firm Docs/1782/180383/00718473.DOCX:1 }

info@ansbacher.net • www.ansbacher.net

## **COVER LETTER**

#### TO: Registration Section Division of Corporations

REED INVESTMENT PARTNERS, LLC

SUBJECT: \_

۰.

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:

ZACHARY R. ROTH OR SANDRA L. MORGAN

Name of Person

ANSBACHER LAW, P.A.

Firm/Company

8818 GOODBYS EXECUTIVE DRIVE

Address

JACKSONVILLE, FL 32217

City/State and Zip Code

SUNBIZ@ANSBACHER.NET

□ \$30.00 Filing Fee &

Certificate of Status

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZACHARY R. ROTH OR SANDRA L. MORGAN

Name of Person

904 737-4600 at (\_\_\_\_\_) Area Code Dayt

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

\$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

#### REED INVESTMENT PARTNERS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on <u>11/13/2018</u> and assigned Florida document number <u>L18000265797</u>

This amendment is submitted to amend the following:

### A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	
(Principal office address MUST RF A STREET ADDRESS)	

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 9526 ARGYLE FOREST BLVD

B2-121

JACKSONVILLE, FL 32222

9526 ARGYLE FOREST BLVD

B2-121

JACKSONVILLE, FL 32222

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		2018 ALL	
New Registered Office Address:		DEC	רד_
	Enter Florida street address	-5 SEL	F
	, Florida	Zip Code	Ŧī
New Registered Agent's Signature, if changing Registered Agent:		2015 2015	0

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

• •

• •

Title	Name	Address	Type of Action
MGR	RUFUS REED, III	9526 ARGYLE FOREST BLVD	🖸 Add
		B2-121	
		JACKSONVILLE, FL 32222	Remove
			Change
		<u> </u>	🖸 Add
			C Remove
			Change
·			D Add
			Remove
			Change
			06
			Change
			D Add
			Remove
			D Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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#### E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_\_\_(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	November 21	,	
		Signature of a member or authorized representative of a member	
	RUFUS REED, III		

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00