<u>L19000206504</u>

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COVER LETTER

TO: Registration Secti Division of Corpo			:
SUBJECT: Red	Hills Partners	I, LLC	<i>*</i> ,
	Name of Limit	ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are subn	nitted for filing.	
	ence concerning this matter to		
	JAKE W	HITFIELD Name of Person	
		Firm/Company	
	2910 Ker	Try Forest Pky Ste	D4-352
	Tallah	City/State and Zip Code	9
	JAKEW E-mail address: (1	11 TFIFLD of gmail. o be used for future annual report notif	ication)
For further information con	cerning this matter, please ca	ıli:	
JAKE WHI		at (<u>850</u>) <u>933</u> Area Code Daytime	-7303 Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address:</u> Registration Se		Street Address: Registration Sec	etion
Division of Co P.O. Box 6327	rporations	Division of Cor The Centre of T	porations
1.0.000.0041			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT . TO ARTICLES OF ORGANIZATION OF

Red Hills Partners (Name of the Limited Liability Comp. (A Florida Limited	nany as If now appears on our r I Liability Company)	ecords <u>.</u>)		-	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L1900020650</u> 4	y were filed on <u>8/19/</u>	2019	and	assigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia Red Hils Tower Company. The new name must be distinguishable and contain the words "Limited Lia		"LLC" or the abb	reviation	ı"L.IC."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:			22		
(Mailing address MAY BE A POST OFFICE BOX)			::		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, y	enter the name	e of the 	new register	<u>ed</u>
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street	address	_ 		
	<u></u>	_, Florida	Zip C		
	City		zap C	CALE	

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
•			☐Change
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
		***	□Add
		□Remove	
			□Change
			□Add
			□Remove
			□Change

	
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(If an effecti Note: 1f t	date, if other than the date of filing:
e record s ord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	April 20 2021
	Signature of a member or authorized representative of a member
	Signatury of a member of authorized representative of a member
	JAKE WHITFIELD Typed or printed name of signee