Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000341328 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SAUL, EWING, ARNSTEIN & LEER, LLP

Account Number : 120060000021 : (561)833-9800

: (561)655-5551 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BIG HEARTS 4 PAWS HOLDING COMPANY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

R. WHITE

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO F ARTICLES OF ORGANIZATION OF

TION 2019 HELE 21 AM 9: 40

BIG HEARTS 4 PAWS HOLDING COMPANY, LLC
(Name of the Limited Liability Company as it now appears on our records.)

(Name of the Limited Liability (A Florida	y Company as it now appears on Limited Liability Company)	our records.
The Articles of Organization for this Limited Liability Co	ompany were filed on August	22, 2019 and assigned
Plorida document number L19000215049		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
RDR HOLDING COMPANY, LLC		
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	,
Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered agent and/or the new registered office address here:		ds, enter the name of the new reg
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	treet address
		. Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered	d 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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

(H19000341328 3)

• 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>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			Remove
			Change
			Remove
			Change
			= Remove
			TChange
		Remove	
			Remove
			~`Change

Page 2 of 3

_	
_	
_	
	·
_	
ote: I	e date, if other than the date of filing: tive 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 605.020 filte date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed that's effective date on the Department of State's records.
reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier both day after the record is filed.
ated_	Delember 21 st 2019 Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	DEBORAH L. KLEIN
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

(H19000341328 3)