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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RED Real Estate Associates LLC 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:
Mitton Vergara Name of Person
RED Real Estate Associates LLC.
1110 Brickell Ave STE 607
MIAMI, FL 33131 City/State and Zip Code
info @ florida construction net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Milton Vergara at (754) 422-9250 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee. \$\Certificate of Status & Certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee. \$\Bigcup \$60.00 Filing

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

KED Keal Estate As	Sociates LLC.
(<u>Name of the Limited Liability Company as it n</u> (A Florida Limited Liability C	ompany)
The Articles of Organization for this Limited Liability Company were fill Florida document number 190022065.	ed on 9 30 19 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
The new name must be distinguishable and contain the words "Limited Liability Comp-	any," the designation "LLC" or the abbreviation "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)	E
	- C
B. If amending the registered agent and/or registered office aderegistered agent and/or the new registered office address here:	dress on our records, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address:	·
	Enter Florida street address
	Florida
City	Zip Code

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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Milton Daniel Vergura	1110 Brickell Ave STEGOT MIAMI, FL 33131	[X r Add
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(If an effer <u>Note:</u> I	te date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	9/30/19
	Senature of a member or authorized representative of a member
	Milton Daniel Vergara. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00