L200000 67729

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COVER LETTER

TO: Registration Solution of Col			
SUBJECT:	Red Bow L	- LC	
	Red Bow L Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jesus 1	Fernando Licra Name of Person	
	- Red i	Bow LLC Firm/Company	
	_ 231 5.	14:11 Auc.	
	Deland	Florida 3272 City/State and Zip Code	24
For further information c	E-mail address: (to be used for future annual report notifi	ecation)
To radice into macion c	someering this matter, please e	d11.	
Jesus F.	Liera	at (<u>407)</u> <u>575</u> Area Code Daytime	5446 Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	്⊈\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 9 Division of C P.O. Box 632	Section Corporations	Street Address: Registration Section of Corp The Centre of Ta	orations

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

(Name of the Limited Liability Company as it now appears on but receited.) (A Florida Limited Liability Company) **LLATASSIL** The Articles of Organization for this Limited Liability Company were filed on Mark O2, 2020 and assigned Florida document numberL2\infty Oco 67729. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N A 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 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: N A	Red Bow	LLC 2020 MAY 20 AM 10: 05
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: \[\mathcal{N} \cappa \text{A} \] The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: \[\lambda \sum A \text{ TREET ADDRESS} \] Enter new mailing address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: \[\lambda \sum A \text{ POST OFFICE BOX} \] 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 the Limited Liability Con (A Florida Limite	mpany as it now appears on our records, but the Liability Company ALLAHACCE.
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(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registagent and/or the new registered office address here:		
agent and/or the new registered office address here:	••	NIA
Name of New Registered Agent: N/A		ice address on our records, <u>enter the name of the new register</u>
	Name of New Registered Agent: NA	†
New Registered Office Address: Enter Florida street address	New Registered Office Address:	Estay Elavida etwat address
thier r toriau street daaress		t.mer r toriau sirvet adaress
, Florida		, Florida

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
AMBR	Angela Vanesa Cardenas	231 S. Hill Auc.	[X Add
		Deland, FL 32724	Remove
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Effect	ive date, if other than the date of filing:
lf an cfi Note:	ective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docum	ent's effective date on the Department of State's records.
o rocar	deracifiae a dalayari affarties data hat matem affarties data an 12.01 mm and the 12.02 at a green and the
rd is fi	d 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 led.
IX.a.d	DS/12/2020
Dated	05/18/2020
	mul 1 a
	Signature of a member or authorized representative of a member
	Jesus Fernando Liera Typed or printed name of signee