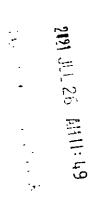
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	— . Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Redneck J L	LC	
Name of	f Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
JASON	Bran Hey Name of Person	·
Red	neck 5 Firm/Company	
56015	Sw 197th Terrace	2121
Dancellon	FI 34431 City/State and Zip Code	2121 JUL 26
Brantfe E-mail addre	48653 Q Jahoo. Comess: (to be used for future annual report notificat	M 1: 19
For further information concerning this matter, plea		49
JASOn Brantley Name of Person	at (<u>&13</u>) <u>4812</u> Area Code Daytime Te	122 lephone Number
Enclosed is a check for the following amount:		
\$\$25.00 Filing Fee Sand Sand Filing Fee & Certificate of Statu		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section	Street Address:	-
Division of Corporations	Registration Section	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number <u>L 21 60 0 333 5 32</u>	company were filed on July 22, 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	ESS)
Enter new mailing address, if applicable:	JUL 26
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, enter the name of the new registered
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 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>	<u>Address</u>	Type of Action
MBR_	JASON Brantley	5601 Sw 1974 Terrace Dunellon F1 84431	Nad
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ective date, if other than the date of filing: 20 20 effective date is listed, the date must be specific and cannot be prior to date of filing:)2\ (optional)
effective date is listed, the date must be specific and cannot be prior to date of filite: If the date inserted in this block does not meet the applicable statutor	ing or more than 90 days after filing.) Pursuant to 605,020
rument's effective date on the Department of State's records.	ay ming requirements, this date with not be listed a
cord specifies a delayed effective date, but not an effective time, at 12:0 s filed.	I a.m. on the earlier of: (b) The 90th day after the
•	
ed July 23 2021	
(CH &	