L22000017153

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COVER LETTER

	Registration Sect Division of Corpo			
	Redcat Dispa			
SUBJEC	TT:	Name of Limit	ed Liability Company	
The encl	osed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please re	turn all correspond	dence concerning this matter to	o the following:	
		Channing Hinton		
			Name of Person	
		Redcat Dispatch LLC		
			Firm/Company	
		15767 Lem Turner Rd		
			Address	
		Jacksonville, FL 32218		
			City/State and Zip Code	
		dispatch@redcat.cc		
		E-mail address: (t	o be used for future annual report	notification)
For furth	her information co	ncerning this matter, please ca	ili:	
Channi	ng Hinton		904 3709332 at ()	2
	Name of	Person	Area Code Da	rtime Telephone Number
Enclose	d is a check for the	e following amount:		
■ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 1 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	<u>s:</u>	Street Addres	<u>s:</u>

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Redcat Dispatch LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/07/2022 and assigned Florida document number L22000017153 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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>	Name	<u>Address</u>	Type of Action
AMBR	Khiantia Brinkley	15767 Lem Turner Rd	 Add
		Jacksonville, FL 32218	□Remove
			☐Change
			□Add
			□Remove
			☐ Change
			□Add
		<u>-</u>	□Remove
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