L22000156282

(Requestor's Name)
(Address)
()
(Address)
(City/State/Zip/Phone #)
· , ,
PICK-UP WAIT MAIL
(D. J. J. Fally, N. J.
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Obtained dopied
Special Instructions to Filing Officer.

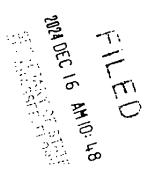
Office Use Only



200439612402

LLC Amena

12/17/24--01002--010 ***25.00



A. RAMSEY DEC. 18 2024

CORPORATE ACCESS,

When you need ACCESS to the world

INC.

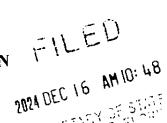
236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WAIKIN

		WALK IIV
	PICK UP:	JENA 12/16
	CERTIFIED COPY	· · · · · · · · · · · · · · · · · · ·
XX	РНОТОСОРУ	
	CUS	
XX	FILING	LLC AMEND
<u>R</u>]	EDWOOD CP DEV, LLC ORPORATE NAME AND DOCUMEN	NT #)
(Co	ORPORATE NAME AND DOCUMES	N'1`#)
(C)	DRPORATE NAME AND DOCUMEN	NT #)
(C)	ORPORATE NAME AND DOCUMEN	NT #)
(Co	ORPORATE NAME AND DOCUMES	NT#)
(CC	ORPORATE NAME AND DOCUMEN	N°T #)
CCIAL IN	ISTRUCTIONS:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Redwood CP Dev, 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 Liabil on Florida document number <u>L22000156282</u>	lity Company were filed	04/13/2022	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability compan	y here:	
The new name must be distinguishable and contain the words	"Limited Liability Company,"	the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable			
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office address on o		e name of the new registered
Name of New Registered Agent: New Registered Office Address:			
The in Telegrotion of College (Against Sec.	Enter	Florida street address	
		, Flor	
_	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>	Addres	Type of Action
MGR/AMBR	Winston Holdings CP LLC	18215 Biscayne Blvd	□Add
		Suite 2118	□Remove
		Aventura, FL 33160	🗵 Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			
			□Remove
			□ Remove
			□Change

AIIIVII(ding any other information,	enter change(s) here:	_{-{} Анасн ваатопаt S	neers, y necessar	<i>y.</i> j
					
					
				·	
				-	
				,	
				· ·	· · · · · · · · · · · · · · · · · · ·
(If an effect Note: If	e date, if other than the date tive date is listed, the date must be sp the date inserted in this block do t's effective date on the Departm	ecific and cannot be prior to oes not meet the applicat	date of filing or more the statutory filing requ	(optional) n 90 days after filing irements, this date	g.) Pursuant to 605,0207 (3
he record s ord is filed	specifies a delayed effective date l.	, but not an effective tim	c, at 12:01 a.m. on the	earlier of: (b) T	he 90th day after the
Dated	December 16		_•		
		TAR			
	Signa	ture of a member or author	zed representative of a n	nember	
	Brian A. Sidman				

Filing Fee: \$25.00