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(Re	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(D	ocument Number)	
d Copies	Certificates	s of Status
al Instructions to	Filing Officer:	

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A. RIVERS
JAN 2 5 2023



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COVER LETTER

Registration Section **Division of Corporations**

	EDWOOD LLC
	Name of Limited Liability Company
closed Articles of	Amendment and fee(s) are submitted for filing.
return all corresp	ondence concerning this matter to the following:
	K. Matthew Rentz II, Esq.
	Name of Person
	Rentz Law Firm P.L.L.C
	Firm/Company
	P.O. Box 460
	Address
	LaBelle, FL 33975
	City/State and Zip Code
	MattRentz@RentzLawFirm.com
	E-mail address: (to be used for future annual report notification)
urther information o	concerning this matter, please call:
Rentz	863 674-1935
Name (at () at () Daytime Telephone Number
osed is a check for t	he following amount:
\$25.00 Filing Fee	(X \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)

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

Street Address: 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

AML 07 REDWOOD LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

rticles of Organization for this Limited Liability C	Company were filed on August 02, 2022	and assigned
a document number L22000340260		and assigned
mendment is submitted to amend the following:		
amending name, enter the new name of the lim	ited liability company here:	
w name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
new principal offices address, if applicable:		
cipal office address MUST BE A STREET ADDI	RESS)	
	4-	
r new mailing address, if applicable:		
ling address MAY BE A POST OFFICE BOX)		
		· · · · · · · · · · · · · · · · · · ·
amending the registered agent and/or registered t and/or the new registered office address here: Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	233
	New Registered Agent: stered Office Address: Enter Florida street address Florid	
		lorida Zip Çode
Registered Agent's Signature, if changing Registered	·	2022
eby accept the appointment as registered agent is sions of all statutes relative to the proper and cost the obligations of my position as registered agent the obligations of my position as registered agent the merely reflect a change in the registere cany has been notified in writing of this change.	omplete performance of my duties, a gent as provided for in Chapter 605,	nd Lam familiar with and F.S. Or, if this document is

inding Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> <u>ioved from our records</u>:

= ManagerR = Authorized Member

Name	<u>Address</u>	Type of Action
LMAM HOLDINGS LLC	49 N Industrial Loop	= Add
	LaBelle, FL 33935	□ Remove
		□Change
	 	□Add
		Remove
		□Change
	 	□Remove
		□Change
		□ Add
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e date, ir otner tive date is listed, t	than the date of filing:	ior to date of filing or more	(optional) than 90 days after filing.) Pursuant to 605.	0207 (
	I in this block does not meet the app c on the Department of State's recor		quirements, this date will not be liste	d as t
it seriective dat	. on the Department of State s recor	us.		
بروامان و جوزانورون	nd affective data but was an affective	utinu at 12:01 a m. on t	he earlier of: (b) The 90th day after	tho
i.	the effective date, but not an effective	e mas, at 12,01 d.m. On t	ne carner of, (o) The will tray after	inc
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October	<u> 45 . 202</u>	.) .		
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	ars at it			
	Signature of a member or au	amorized representative of a	i member	
Lauro M. Ace	vedo			
	Typed or pr	inted name of signee		

Filing Fee: \$25.00