L23000117368

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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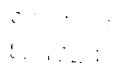




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COVER LETTER

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TO: Registration Se Division of Cor			
SHRIECT.	Ledwood D	namics LLC	
SUBJECT:	Name of Lir	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	John	Harahan Name of Person	
		Name of Person	
	Reduce	d Dynanics LLC Firm/Company	
		Fim/Company	
	3461.	SW Rivera St	
	Port S	City/State and Zip Code Tranics (Protonnail. 6) to be used for future annual report notification)	
		City/State and Zip Code	
	Reduced D	janics @ protonnail. con	
	r-man address. (to be used for future annual report notification)	
For further information c	oncerning this matter, please o	all:	
Name o	f Person	at () Area Code Daytime Telephone Number	
Enclosed is a check for the	re following anrount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee.	
323.00 Fitting Fee	Certificate of Status	Certified Copy Certificate of Status &	
		(additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Addres	<u>s:</u>	Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Redwood Dynami	cs LLC
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company we Florida document number $\frac{L 23000117368}{}$	ere filed on March 6, 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	cy company here:
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
-	· · ·
Enter new mailing address, if applicable:	. 25
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
_	.
	ර
B. If amending the registered agent and/or registered office adeagent and/or the new registered office address here:	dress 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
Mgr	Allison J. Harahan	3461 SW Rivera	□ Add
·		3461 SW Rivera St Port St. L FL 34	rcie Remove
		T- 34	7.53 □Change
			□Add
			□Remove
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			चRепюve
			□Change

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