# 124000163930

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations		
SUBJECT:	RED PINE A	MATION LLL	
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	<u>-</u>	
	Ralph	Principe Name of Pricon	
		reality of 1 classif	
	Ked Piv	Communities LL Firm/Company	<u>C</u>
	CU 5 -	- Frank Court	
	3120	Address Court	<del></del>
	West	Palm Beach, FL 33 City/State and Zip Code	3405
	E-mail address: (	ncipe @ red pine come to be used for future annual report noti	munitles.com (fication)
For further information o	concerning this matter, please c	all:	
Palph	Principe	at (561) 723 Arua Code Daytim	-3250
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S		Street Address:	atia m
Division of C	Corporations	Registration Se Division of Cor	
P.O. Box 632 Tallahassee, 1		The Centre of T	
rananassee, i	1 L 34317	Tallahassee, FL	e Street, Suite 810 . 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REP P	INE AV	ATTON as It how appears	on our records.)	<u>.ED</u>
(A	Florida Limited Lia	bility Company)	on our records.)	PH 2: 28
The Articles of Organization for this Limited Liab	ility Company w			
Florida document numberL24 000 16393				· · · · -
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liabili	ty company her	<u>re</u> :	
	NOTTAS			-
The new name must be distinguishable and contain the word	ls "Limited Liability	Company," the de-	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	327	Plaza Real	
(Principal office address MUST BE A STREET)		Ste 2	.17	
		BOCA R	laton, FL 33	432
Enter new mailing address, If applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>			
B. If amending the registered agent and/or reg agent and/or the new registered office address l		dress on our re	cords, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:		Adam H	odkin	
New Registered Office Address:	327	Plaza Reg Enter Flori	al Ste 217 da street address	<u> </u>
	Boxa	Raton	, Flo <del>rida</del>	33432
	- IVVV	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 Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
			□Add
			□Remove
		<del>-</del>	□Change
<del></del>	<del></del>		□Add
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f an ef <u>Note:</u>	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier case 90th day after the record is filed.
)atec	April 16 2024
	Signature of member or authorized representative of a member  Raph A Principe  Typed or printed name of signee