

L240000379057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

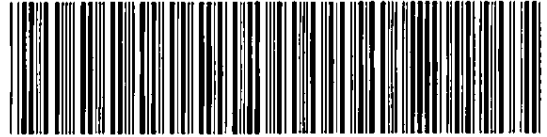
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



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S CHATHAM  
DEC 11 2024

12/12/24--01002--011 \*\*75.00

NOTICE

2024 DEC 12 AM 11:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FL

CORPORATE  
ACCESS,  
INC.

When you need ACCESS to the world

725

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: JENA 12/12

CERTIFIED COPY

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XX FILING

LLC AMEND

1. REDWOOD CP DEVELOPER III, LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Redwood CP Developer III, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Valerie Zackschewski  
Name of Person

BAS Holdings  
Firm/Company

3921 Alton Road, Suite 439  
Address

Miami Beach, FL 33140  
City/State and Zip Code

valerie@basholdings.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valerie Zackschewski at ( 646 ) 831-5686  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Anthony Seijas	7740 SW 104 Street	<input type="checkbox"/> Add
		Suite 201	<input checked="" type="checkbox"/> Remove
		Pinecrest, FL 33156	<input type="checkbox"/> Change
MGR	Alejandro Rodriguez	7740 SW 104 Street	<input checked="" type="checkbox"/> Add
		Suite 201	<input type="checkbox"/> Remove
		Pinecrest, FL 33156	<input type="checkbox"/> Change
AMBR	Eric Haynes	3921 Alton Road	<input checked="" type="checkbox"/> Add
		Suite 439	<input type="checkbox"/> Remove
		Miami Beach, FL 33140	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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TALLAHASSEE, FL  
2014 DEC 2 PM 2:31  
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TALLAHASSEE, FL

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2024 DEC 12 PM 2:31  
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TALLAHASSEE, FL.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated December 11, 2024

Brian A. Sidman

Typed or printed name of signee

**Filing Fee: \$25.00**