## L250008998S

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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2025 JUN 11 PM 3: 39 SECRETARY OF STATE TALLAHASSEE, FL

June 11,25

is the

## COVER LETTER

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Cor	porations				
	entures LLC				
SUBJECT:	Name of Lim	ited Liability Company			
T	A do 4 6- (A) and and	in_d C GV			
	Amendment and fee(s) are sub	-			
Please return all correspo	ndence concerning this matter	to the following:			
	Chris Cardona				
	-	Name of Person			
	Red Road Ventures LLC				
	***************************************	Firm/Company			
	2761 Gages Court			SECF TAL	2025 .
		Address		ETA LAF	JUN N
	Alford, FL 32420			RETARY OF STAT ALLAHASSEE, FL	2025 JUN 11 PM 3: 39
		City/State and Zip Code	<del></del>	)FS EE,	<u> ≃</u>
	redroadventures56@gmail.c	com to be used for future annual report notifi		P I	ယ္မ
For further information c	oncerning this matter, please of	•	canon <i>)</i>	ΓTÌ	ω
	oncerning this matter, prease co				
Gina Brown		802 353-6540 at ()			
Name o	t Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional cop	f Status & py	
Mailing Addres		Street Address:	tion		
Registration S Division of C		Registration Sec Division of Corp			
P.O. Box 632	-	The Centre of Ta			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



May 28, 2025

CHRIS CARDONA 2761 GAGES COURT ALFORD, FL 32420 US

SUBJECT: RED ROAD VENTURES LLC

Ref. Number: L25000089985

We have received your document for RED ROAD VENTURES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

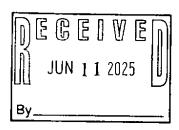
Please select only one type of action for each member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 025A00011462



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Red Road Ventures LLC			
(Name of the Lim	ited Liability Co (A Florida Lim	ompany as it now appears on our raited Liability Company)	ecords.)
The Articles of Organization for this Limited I			and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	-	liability company here:	
N/A	-		
The new name must be distinguishable and contain the	words "Limited l	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	N/A	
(Principal office address MUST BE A STRE	ET ADDRES	<u>s</u>	
Enter new mailing address, if applicable:		N/A	2025 JU SECRE TALL
(Mailing address MAY BE A POST OFFICE	E BOX)		TARY AHAS
B. If amending the registered agent and/or agent and/or the new registered office addr	•	fice address on our records, <u>e</u>	S S S
			, , ,
Name of New Registered Agent:	N/A_		
New Registered Office Address:	N/A		
		Enter Florida street d	address
		City	, Florida
		City	ZID 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>	<u>Name</u>	Address	Type of Action
AMBR	Gina Brown-Cardona	2761 Gages Court, Alford FL 32420	□ Add
			Remove
		<del> </del>	□Change
AMBR	Gina Brown	2761 Gages Court, Alford, FL 32420	
			2026 JUN SERRETA
			—————————————————————————————————————
			PM 3: 39
			Change
		···	CjAdd
			□Remove
			□Change
	<del></del>		□Add
		<del></del>	□Remove
			□Change
		<del></del>	□Add
			□Remove
			□Change

written as Gina Brown-	a-Cardona. The correct name is Gina Brown. This was an error, NOT a legal name change.
Also, Mr. Cardona has	recently acquired a new phone number and should read as follows: 850-557-1920.
<del></del>	
<del></del>	
	TAL
	TAR AH
	ASSI P
	SEF ST 3:
fective date, if other than	the date of filing: (optional) ate must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
ite: If the date inserted in the	this block does not meet the applicable statutory filing requirements, this date will not be listed the Department of State's records.
cument's effective date off	the Department of State's records.
ecord specifies a delayed efficients	ffective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
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Filing Fee: \$25.00