## N21000004578

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

name of corporation: Redelich	( Street Members Group, Inc.	
DOCUMENT NUMBER: N210000	04578	
The enclosed Articles of Amendment and fee a		
Please return all correspondence concerning thi	s matter to the following:	
Rosalind Go	(Name of Contact Person)	
Reddick Stre	CT Members Croup, Inc. (Firm/Company)	
•	Terrace S.E.	
Palm P	Cy Fl 32909 (City/ State and Zip Code)	
E-mail address: (to be for further information concerning this matter.	please call:	, , , ,
Rosalina Guitor (Name of Contact	please call:  at 331-537-79   Original Person   Area Code   (Daytime Telephone Number)  ande payable to the Florida Department of State:	ol Ptil
Enclosed is a check for the following amount n	ade payable to the Florida Department of State:	5) 55
S35 Filing Fee S43.75 Filing F Certificate of S	ee &   \$\Bigcia \text{\$\Pi\$} \t	Ų.
Mailing Address Amendment Section	Street Address Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

Reddick Street Mem	hers Gra	wo Inc.		
(Name of Corporation as currently filed with the Flo				
N21000004578				
	Number of Corpo	ration (if known)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Flor	rida Not For Profit	Corporation adopt	s the following
A. If amending name, enter the new name of the co	rporation:			
N/A				The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "ir	icorporated" or the	abbreviation "Cor	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	936	Hattaras	Terrace	S.E.
	7		32909	SET 2021
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		in Florida, enter tl	ne name of the	ALLY
Name of New Registered Agent:	N/A			
<u>New Registered Office Address</u> :		(Florida stree	1 address)	- FE
Nacron			Florida	
	(City)		(Zip Code	?)
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.	stered Agent:  am familiar with	and accept the oblig	zations of the posit	ion.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:  X Change X Remove X Add	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	ES	Johnnie S Harrison	626 Readick Street Melbourne, Fl 32901
Remove  2) Change Add	D	Arthurl Marpe	615 Reddick Street Melbourne, Fl 32901
Remove Change Add	<u>P</u>	Arthur L Snarpe	VIS Roddick stract Melbourne, FI 32901
Remove  4) Change Add		Angeles D. McIntosh	WIS Reddick Street & Melbourne, Fl 32001
Remove 5)ChangeAdd			PH Z
Remove			TE
6) Change Add	<u></u>		
Remove			
E. If amending or addi (attach additional she		icles, enter change(s) here: (Be specific)	
N/A			<del> </del>
	<del> </del>		

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		E E
The date of each amendment(s) ad date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blod document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adwas/were sufficient for approva	lopted by the members and the number of votes east for the amendment	.(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

July 17, 2023

Signature Positional July

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Rosalind E, Gartor

(Typed or printed name of person signing)

Secretary

(Title of person signing)

SECRETARY SESTAT