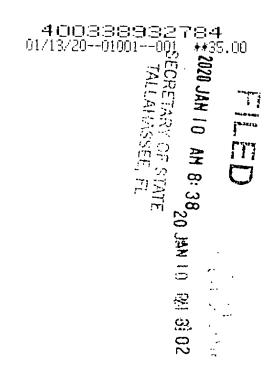
P14000085354

(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



400338932784



O SIMMONS JAN 1 3 2020

CORPORATE

When you need ACCESS to the world

INC. 23

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 U	JP: <u>01/09/2020</u>
		CERTIFIED COPY	
		PHOTOCOPY CUS	
	хх	FILING	AMENDMENT
1.		RED EMBER MANAGEME	
2.		(CORPORATE NAME AND DOCUMEN	VT #)
3.		(CORPORATE NAME AND DOCUMEN	TT #)
4.		(CORPORATE NAME AND DOCUMEN	TT #)
5.		(CORPORATE NAME AND DOCUMEN	T #)
6.		(CORPORATE NAME AND DOCUMEN	T #)
	CIAI TRU	L CTIONS:	

Articles of Amendment to Articles of Incorporation of

RED EMBER MANAGEMENT, INC.

(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
P14000085354		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, to Articles of Incorporation;	this Florida Profit Corporation adopts the follo	wing amendment(s
A. If amending name, enter the new name of the corporation	<u>:</u>	
		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corporation name must con	igijon "Corp.," Min B word
B. Enter new principal office address, if applicable:	>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		70 17
	51): 35 pm
		<u>یم</u> پ
Enter new mailing address, if applicable:	بنا	38
(Mailing address MAY BE A POST OFFICE BOX)		<u>ு</u>
		···
 If amending the registered agent and/or registered office a new registered agent and/or the new registered office adds 	iddress in Florida, enter the name of the ress:	
Name of New Parintered Agent		
Name of New Registered Agent		
	·	
(Florida	street address)	
New Registered Office Address:	, Florida	
		Lip Code)
New Registered Agent's Signature, if changing Registered Agent	ent:	
hereby accept the appointment as registered agent. I am famili	ar with and accept the obligations of the position	on.
,	and the second s	
Signature of Nev	w 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	PT	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	v		P.O. BOX 827	
XAdd			NEW SMYRNA BEACH,	
Remove			32170	
2) Change			_	
Add			SSE SSE	
Remove 3) Change			5.77 S	
Add			-	
Remove				
4) Change				
Add				
Remove				
5) Change			·	·····
Add				
Remove				
б) Change		-		
Add				
Remove				

f amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)		
			-
		SE	202h
		PR €	} .
			<u> </u>
			5 j
		(2)	
		めい 日 公 日 と 日 と 日 と 日 に る り る り る り る り る り る り る り る り る り る	I ,
		E ST	ب م
		- 112	ယ ထ
		मि	w
Fan anadan ada anada - 6	t to a second and a second		
provisions for implementing the amer	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:		
(if not applicable, indicate N/A)	The state of the s		
		- ·	
			
			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	40
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	17. SECRI
■ The amendment(s) was/were adopted by the incorporators, or board of directors without sharehol action was not required.	der action and shareholder
Dated	AM 8:
Signature	: 38 TATI FL
(By a director, president or other officer – if directors or officers have needed, by an incorporator – if in the hands of a receiver, trustee, or ot appointed fiduciary by that fiduciary)	
JOSH ASHER	
(Typed or printed name of person signing)	
P	
(Title of person signing)	