

L040000036043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

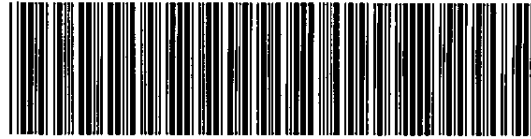
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2015 APR 10 PM 2:37

Amend/Name
ch 8
@ 4.23.15

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sturgill Capital Consultants, 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:

Scott Sturgill

Name of Person

Sturgill Capital Consultants, LLC

Firm/Company

898 Waterway Place

Address

Longwood, FL 32750

City/State and Zip Code

scott.sturgill@durablesafety.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Sturgill at **407** **792-6365**

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2015 APR 10 PM 2:37

Sturgill Capital Consultants, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/04/2004 and assigned
Florida document number L04000036043

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DSP PARTNERS, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

898 Waterway Place

(Principal office address MUST BE A STREET ADDRESS)

Longwood, FL 32750

Enter new mailing address, if applicable:

898 Waterway Place

(Mailing address MAY BE A POST OFFICE BOX)

Longwood, FL 32750

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

J. Scott Sturgill

New Registered Office Address:

898 Waterway Place

Enter Florida street address

Longwood

City

Florida 32750

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

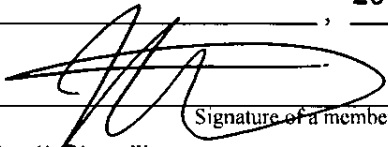
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	J. Scott Sturgill	432 Still Forest Terrace	<input type="checkbox"/> Add
		Sanford, FL 32750	<input checked="" type="checkbox"/> Remove
MGR	J. Scott Sturgill	898 Waterway Place	<input checked="" type="checkbox"/> Add
		Longwood, FL 32750	<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 7, 2015



Signature of a member or authorized representative of a member

J. Scott Sturgill

Typed or printed name of signee