

L22000361946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

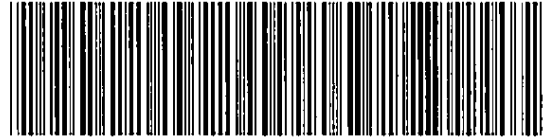
(Document Number)

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Certificates of Status \_\_\_\_\_

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2022 NOV 15 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/15/22--01012--007 --\$25.00

2022 NOV 15 AM 11:05

A. BUTLER

NOV 15 2022

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DB Infinity Home 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:

Jose Martin Vivas  
Name of Person

DB Infinity Home LLC  
Firm/Company

12420 N Florida Ave  
Address

260 N Florida Tampa FL 33612  
City/State and Zip Code

Joseam35@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose Martin at (987) 974-0152  
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 Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2022 NOV 15 AM 11:16

DB Infinity Home LLC

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

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned  
Florida document number L22000361946

This amendment is submitted to amend the following:

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

DB Infinity Homes LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Jose G. Martinez Vivas

New Registered Office Address:

12420 N Florida Ave 260

Enter Florida street address

Tampa

City

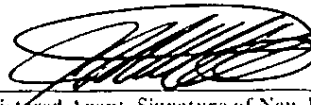
Florida

33612

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 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>   |
|--------------|--------------------------|---|---|
|              | <u>Olga I Aineiro</u>    | <u>1869 W Guard Ct</u><br><u>west Jordan Utah 84088</u>                           | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove                                    |
|              |                          |   | <input type="checkbox"/> Change   |
|              | <u>Brianlee Martinez</u> | <u>180 Blvd Media Luna</u><br><u>APT 2107 Paisaje</u><br><u>Carolina PR 00987</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change |
|              | <u>MARTINEZ JEREKL.</u>  | <u>12420 N Florida Ave</u><br><u>262</u><br><u>Tampa FL 33612</u>                 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change |
|              |                          |   | <input type="checkbox"/> Add  |
|              |                          |   | <input type="checkbox"/> Remove   |
|              |                          |   | <input type="checkbox"/> Change   |
|              |                          |   | <input type="checkbox"/> Add  |
|              |                          |   | <input type="checkbox"/> Remove   |
|              |                          |   | <input type="checkbox"/> Change   |
|              |                          |   | <input type="checkbox"/> Add  |
|              |                          |   | <input type="checkbox"/> Remove   |
|              |                          |   | <input type="checkbox"/> Change   |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Lined area for amending information.

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

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 NOV 15, 2022



Signature of a member or authorized representative of a member

Jose C Martinez Vivas

Typed or printed name of signee