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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
AC Dunrite SUBJECT:	e, LLC		Person Papany Salar annual report notification) Code Salar annual report notification) Salar annual report notification)
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Daniel A Gonzalez		
	···	Name of Person	
	AC Dunrite, LLC		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	2501 SW 57th Avenue, Su	ite 305	
		Address	-
	Ocala, FL 34474		
	acdunrite@gmail.com	City/State and Zip Code	
		to be used for future annual report notifi	cation)
For further information e	oncerning this matter, please of	all:	
Daniel A Gonzalez			
Name o	f Person	Area Code Daytime	Telephone Number (2)
			•
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)	Certificate of Status & . Certified Copy
			24
Mailing Addres Registration S Division of C	Section Corporations	Registration Sectorial Division of Corp	oorations
P.O. Box 632 Tallahassee, I		The Centre of Ta 2415 N. Monroe	allahassee Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailling 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 regist gent and/or the new registered office address here: Name of New Registered Agent:	(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)		
A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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 regist and/or the new registered office address here: Name of New Registered Agent:	The Articles of Organization for this Limited Liability Co.	ompany were filed on 10/21/2002	and as	signed
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS	This amendment is submitted to amend the following:			
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS	A. If amending name, enter the new name of the limit	ted liability company here:		
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) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new regist gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Emer Florida street address	N/A			
Enter new 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 regist agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the a	bbreviation "I	"L.C."
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new regist agent and/or the new registered office address here: Name of New Registered Agent:	Enter new principal offices address, if applicable:	N/A		
Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new regist agent and/or the new registered office address here: Name of New Registered Agent:	Principal office address MUST BE A STREET ADDR.	ESS)		
3. If amending the registered agent and/or registered office address on our records, enter the name of the new regist and/or the new registered office address here: Name of New Registered Agent:	Enter new mailing address, if applicable:	N/A		
Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Cit	Mailing address MAY BE A POST OFFICE BOX)			
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City Ztp Code		office address on our records, enter the nan	ne of the ne	w registe
New Registered Office Address: Emer Florida street address Florida City Ztp Code			·.	C
Enter Florida street address Florida City Typ Code	Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·		
City . Florida	New Registered Office Address:	Paris D. M. Commercial		•
City Ztp Code —			· S.	ij
\sim			Ztp Code	J

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 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
MNR	Daniel A Gonzalez	2501 SW 57th Ave. Unit 305 Ocala, FL 34474	= Add
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
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		1	□Change
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07/14/2021		\geq β
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or note: If the date inserted in this block does not meet the applicable statutory filing cument's effective date on the Department of State's records.	nore than 90 days after filing.) Pure	want to 605.0207
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. is filed.	on the earlier of: (b) The 90t	h day after the
ted July 14		
\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Signature/of a member or authorized representative	and a manual bear	

Filing Fee: \$25.00