

LO4 0000 16 272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

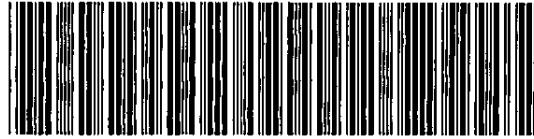
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

MST

Office Use Only



300102325583

05/23/07--01042--005 ++25.00

07 MAY 23 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DS LAND L.L.C.  
(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:

DANIEL SHIR  
(Name of Person)

DS LAND L.L.C.  
(Firm/Company)

10527 ZURICH STREET  
(Address)

COOPER CITY, FLORIDA 33026-4826  
(City/State and Zip Code)

FILED  
07 MAY 23 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DANIEL SHIR at ( 954 ) 704-0128  
(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**

DS LAND, L.L.C.

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on MARCH 1, 2004 and assigned document number L04000016272.

**SECOND:** This amendment is submitted to amend the following:

THE NAME DS LAND L.L.C. IS TO BE CHANGED TO:

DOLPHIN PROPERTIES, L.L.C.

**FILED**  
**07 MAY 23 AM 10:43**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Dated MAY 9, 2007.



\_\_\_\_\_  
Signature of a member or authorized representative of a member

DANIEL SHIR

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**