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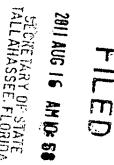
EXAMINER

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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: 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:					
GEORGE J.F. WERNER ESONAL Name of Person	TIME				
Firm/Company 1602 EAST BRD AVE. Address	C				
YBOR CITY, FL 33605 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
GEORGE J.F. WERNER, Esq. at (888) 899-0205 Name of Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$ Certificate of Status Certificate of Status S55.00 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

D.C.A. LL			
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on ability Company)	our records.)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>LOHOOO373</u> 44	were filed on	18 OF SECRETAR	an Bassigned
This amendment is submitted to amend the following:		SEE. F	E M
A. If amending name, enter the new name of the limited liabil	ity company here:	LORID.	D
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Company,"	the designation "LLC"	or the abbreviation
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)	1602 E YBOR C	AST BRE	33605
B. If amending the registered agent and/or registered office address here:		records, <u>enter the n</u>	ame of the new
Name of New Registered Agent: GEORGE New Registered Office Address: 1602	EAST (VERNER E BRD AVE Iorida street address	SQ.
IBOR	City	, Florida $\frac{35}{2i}$	3605 p 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 608, 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

Page 1 of 2

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

MGR = Manager

MGRM = Managing Member <u>Title</u> Type of Action <u>Name</u> **Address** THE DINOSAUR GROUP, MEMBER Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) GEORGE F. WERNER
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00