

W04000045219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

W04-45219

(Document Number)

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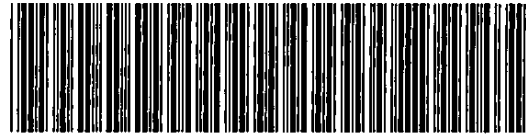
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** D W Enterprise of Central Florida, 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:

Dorothy Edmonson Conley

(Name of Person)

D W Enterprise of Central Florida, LLC

(Firm/Company)

5433 CR 125

(Address)

Wildwood, FL 34785

(City/State and Zip Code)

For further information concerning this matter, please call:

Dorothy Edmonson Conley

(Name of Person)

at ( 352 ) 748-3569

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

ck. # 1211

☐ \$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**

D W Enterprise of Central Florida, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on June 14, 2004 and assigned document number L04000045219.

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

1. Ocala Websolutions.com is a separate business under D W Enterprise of Central Florida, LLC.

2. Manager Members are Robert Holland as Operations Manager and Wallace Conley as Chief Financial Officer.

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Dated December 4, 2006.

06 DEC -6 PM 2:32  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

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

Dorothy Edmonson Conley

Typed or printed name of signee

**Filing Fee: \$25.00**