## L04000049479

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE
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JUN 1 9 2015

S MASON

## **COVER LETTER**

	gistration Sec vision of Corp			
01171007	DNC Home	s, LLC		
SUBJECT:	·	Name of Lim	ited Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspor	ndence concerning this matter	to the following:	
		Dennis E. Chambers		
			Name of Person	_
		DNC Homes L.L.C.		
			Firm/Company	<del></del>
		512 Carley Lane		
			Address	_
		Cocoa, Florida 32926		
			City/State and Zip Code	_
		dennischambers@bellsouth		
		E-mail address: (	to be used for future annual report notification)	
For further	information co	oncerning this matter, please ca	ail:	
Dennis E. (	Chambers		321 537-3444 at ( )	
	Name of	Person	Area Code Daytime Telephone Number	er
Enclosed is	a check for th	e following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
	Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	TOF STATE AND OF STATE SEE. FLORIDA



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 9, 2015

DENNIS E. CHAMBERS 512 CARLEY LANE COCOA, FL 32926

SUBJECT: DNC HOMES L.L.C. Ref. Number: L04000049479

We have received your document for DNC HOMES L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L12000036409 DNC LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 815A00012027

SECRETARY OF STATE

## ARTICLES OF AMENDMENT TO . ARTICLES OF ORGANIZATION **OF**

DNC Homes L.L.C.		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our record	<u>is.</u> )
The Articles of Organization for this Limited Liability Company		and assigned
Florida document number L04000049479		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab		u <del></del>   10
DNC, LLC.  The new name must be distinguishable and contain the words "Limited Liab."	En Community the designation W.L.	Homes L.L.C
		of the anneviation L.L.C.
Enter new principal offices address, if applicable:	512 Carley Lane	
(Principal office address MUST BE A STREET ADDRESS)	Cocoa, Florida 32926	
Enter new mailing address, if applicable:	512 Carley Lane	
• • • • • • • • • • • • • • • • • • • •	Cocoa, Florida 32926	
(Mailing address MAY BE A POST OFFICE BOX)	·	
registered agent and/or the new registered office address her  Name of New Registered Agent:		
New Registered Office Address:		
Hew Registered Office Address,	Enter Florida street addres	58
	FI	orida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
	performance of my duties, as provided for in Chapter 605, address, I hereby confirm the address and the second sec	nd I am familiar with and F.S. Or, if this document is at the limited liability VISION OF AHABASSET ARE AREAS AND AR
Page	1 01 3	51

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
AMBR	Nicholas Chambers	512 Carley Lane	<b>⊡</b> Add
		Cocoa, Florida 32926	☐ Remove
			□ Change
			D Add
			☐ Remove
			□ Change
<del></del>	_		Add
		·	Remove
		—	Change
			Add
			□ Remove
			Change
<del> </del>			D Add
			□ Remove
			SECRETARY DIVISION OF CO SECRETARY SECRETARY ALLIAHASSE
			TARY OF STATE OF CURPURATIONS 18 SM 10: STATE ASSEE FLORIDA

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if nece	essary.)	
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(If an effect Note: I docume	June 3, 2015  (option ctive date, if other than the date of filing:  tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, this ent's effective date on the Department of State's records.  Ord specifies a delayed effective date, but not an effective time, at 12:01 at 90th day after the record is filed.	filing.) Pursuant to 6 date will not be lis	sted as the
Dated _	fune 3 2015		
Daleu _	Signature of a member of authorized representative of a member	15 JL SECT - SECT	SECH
	Dennis E. Chambers	JUN 18 ORETARY AHASSE	F OF C
	Typed or printed name of signee	7,0,7	10480C 10480C 1031
	Page 3 of 3	IO: 51 STATE ORIDA	STATE PRATIC
	Filing Fee: \$25.00		¥.

Filing Fee: \$25.00