

LOS 000039259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

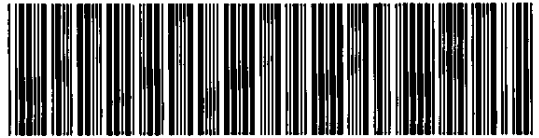
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900156032039

06/16/09--01051--009 \*\*55.00

2009 JUN 16 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T. CLINE

JUN 17 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Danis Group, 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:

Leighton D. Westlake, Jr.

Name of Person

The Danis Group, llc

Firm/Company

10175 Flag Drive

Address

Palm Beach Gardens, FL 33410-4775

City/State and Zip Code

leighton@thedanisgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leighton D. Westlake, Jr.

Name of Person

at ( 561 )

799-5280

Area Code & Daytime Telephone Number

FILED  
2009 JUN 16 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**

The Danis Group, llc

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Apr 21, 2005 and assigned  
Florida document number L05000039259.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Not Amending Name

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Not Amended

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

Not Amended

(Mailing address MAY BE A POST OFFICE BOX)

FILED  
2009 JUN 16 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Not Amended

New Registered Office Address:

Not amended

Enter Florida street address

City, Florida

Zip Code

Zip 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

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

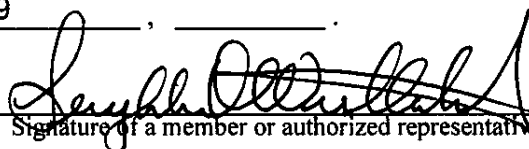
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
DIR	Pamela M. Westlake	10175 Flag Drive Palm Beach Gardens, FL 33410-4775	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	No Further Entries		<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

FILED  
JUN 16 2009  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10:46 AM

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

No Other Amendments

Dated Jun 16, 2009

  
Signature of a member or authorized representative of a member

Leighton D. Westlake, Jr.

Typed or printed name of signee