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COVER LETTER

TO:	Registration Se Division of Co			
cuni	IPAT.	Dan Lashea	a. LLC	
SUBJ	IECT:	Name of Lin	uited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ondence concerning this matter	to the following:	
			Dan L Hardy	
			Name of Person	
			Dan Lashea, LLC	
			Firm/Company	
			3366 Black Willow Trail	
			Address	
			Deland, FL 32724	
			City/State and Zip Code	
			danlashea@gmail.com	
		E-mail address: (to be used for future annual report noti	fication)
For fu	rther information c	oncerning this matter, please ca	all:	
	Dan 🗡	Hovdy	at (407) 374- Area Code Daytim	3267
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	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

<mark>ility Company as it now appears on our records.</mark> da Limited Liability Company)	.)
Company were filed on May 05, 2005	and assigned
 '	
nited liability company here:	
mited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
RESS)	
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istered office address on our records,	enter the name of the r
<u>dress nere</u> :	6
	r.
Futur Florida atreat address	
Emer Pioriaa sireei aaaress	
, Floi	r ida Zip Code
	Company were filed on May 05, 2005 nited liability company here: mited Liability Company," the designation "LLC" RESS) istered office address on our records, dress here: Enter Florida street address

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 605, 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 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 Type of Action <u>Title</u> <u>Name</u> Address □ Add _□ Remove _□ Change _□ Add □ Remove _□ Change _□ Add ☐ Remove ☐ Change ☐ Remove

	_□ Change
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An	ending the purpose of the business to include Networ	k Marketing		
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effectiv	late, if other than the date of filing: tate is listed, the date must be specific and cannot be prior to	o date of filing or more than 90	(optional) days after filing.) Pursuant t	o 605.020
	e date inserted in this block does not meet the applicate effective date on the Department of State's records.	ble statutory filing requirem	nents, this date will not be	e listed a
	·			
	specifies a delayed effective date, but not	an effective time, at	12:01 a.m. on the e	arlier o
he 90	h day after the record is filed.		•	
ed	April 21 2017			
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	Signature of a member or author	ized representative of a memb	er	

Page 3 of 3

Filing Fee: \$25.00