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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DAVON, 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:	
MERRY GLOVER-UHRINEK	
(Name of Person)	
GLOVER MARINE SERVICES, INC.	
(Firm/Company)	
P.O. BOX 2347	
(Address)	7.0
PALM HARBOR, FL 34682	ASEC JAN
(City/State and Zip Code)	
For further information concerning this matter, please call:	FILED 08 JAN 15 AM 11: 06 SECRETARY OF STATE FLORIDA TALLAHASSEE FLORIDA
MERRY GLOVER-UHRINEK at (727 _) 787-5444	PARE 06
(Name of Person) (Area Code & Daytime Te	lephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\times \$30.00 Filing Fee \$\times \$\times \$\times \$55.00 Filing Fee \$\times	\$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

DAVON, LLC (Name of the Limited	Liability Company as it now appea	urs on our records.)		
(A	Florida Limited Liability Company)			
The Articles of Organization for this Limited Lia	ability Company were filed on <u>5/</u>	0/2005 and assigned		
Florida document number <u>L05000046380</u>	·			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liability company he	re: SECF TALL		
The new name must be distinguishable and end with "L.L.C."		THE PERSON AND THE PE		
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:	DENNIS J. KLEIN			
New Registered Office Address:	1725 STARLIGHT DRIVE			
(Enter Florida street address)				
	CLEAWATER	, Florida <u>33755</u>		
	(City)	(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 **Title** Name **Address Type of Action** MGRM **DENNIS J. KLEIN** 1725 STARLIGHT DRIVE Add CLEARWATER, FL 33755 Remove MGRM DAVID ABELOVE 2525 TARPON ROAD Add . NAPLES, FL 34102 Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NEW ADDRESS FOR LLC: 1725 STARLIGHT DRIVE, CLEARWATER, FL 33755 Dated Signature of a member or authorized representative of a member **DENNIS J. KLEIN** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00