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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALL MINASSEE, FLORIDA

D. SCOTT APR 5 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2017

SOTT EISEN, ESQ. 2751 EXECUTIVE PARK DR., SUITE 104 WESTON, FL 33331

SUBJECT: DAD GOLF, LLC Ref. Number: L05000073764

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

Please specify the changes being made on article V of the application.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 617A00004908



COVER LETTER

Div	vision of Corp	orations			
SUBJECT:	DAD GOLF	, LLC			
SUBJECT,		Name of Lin	ited Liability Company	 	
The enclose	d Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	n all correspor	dence concerning this matter	to the following:		
		SCOTT EISEN, ESQ.			
			Name of Person		
			Firm/Company		
		Weston, FL 33331			
			City/State and Zip Code		
		scotte@weisburd-eisen.con			- Albertan
		E-mail address: (to be used for future annual report noti	fication)	
For further is	nformation co	ncerning this matter, please ca	all:		
Scott Eisen			954 473-0500		1 3
	Name of	Person	Area Code Daytim	e Telephone Number	LED
Enclosed is a	a check for the	following amount:			ير بې
\$25.00 F	Filing Fee	☐ \$30.00 Filing Fec & 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)	9

MAILING ADDRESS:

TO:

Registration Section

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

DAD GOLF, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number L05000073764		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or ti	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered registered agent and/or the new registered office address. Name of New Registered Agent:	i office address on our records, <u>en</u>	ter the name of the ne
New Registered Office Address:	Enter Florida street address	
	, Florida	
	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 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 **Title** <u>Name</u> <u>Address</u> **Type of Action** □ Add ☐ Remove _□ Change _□ Add _□ Remove _□ Change _□ Add _□ Remove _ Change _ Add □ Remove □ Remove 🔿 ☐ Change _□ Add □ Remove

_ Change

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Typed or printed name of signee

Filing Fee: \$25.00