05000096413

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T. HAMPTON

MAY 19 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	D & G COMMUNI	CATIONS GROUP, LLC.			
		ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MANDY ROBIN				
	Name of Person				
	D & G COMMUNICATIONS GROUP, LLC.				
	Firm/Company				
	1225 NW 17TH AVENUE, SUITE #103				
	Address				
	DELRAY BEACH, FL 33445				
	City/State and Zip Code				
	mandy@dgcg.us E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please of	•	nony		
For further information	concerning this matter, please t	aii.			
MA	ANDY ROBIN	at ()	147070		
Name	of Person	Area Code & Daytime T	elephone Number		
Enclosed is a check for t	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	INIC APPRICE				

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



RECEIVED

10 MAY 18 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 12, 2010

MANDY ROBIN 1225 NW 17TH AVE STE 103 DELRAY BEACH, FL 33445

SUBJECT: D & G COMMUNICATIONS GROUP L.L.C.

Ref. Number: L05000096413

We have received your document for D & G COMMUNICATIONS GROUP L.L.C. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 010A00011989

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D & G COMMUNICATIONS	GROUP, LLC.	·
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	
The Articles of Organization for this Limited Liability Company were fi	iled on9/26/2005	and assigned
Florida document numberL0500096413		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability con	mpany here:	
The new name must be distinguishable and end with the words "Limited Liab "L.L.C."	oility Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:		ಲ್ತ
(Principal office address MUST BE A STREET ADDRESS)		3 ≦8
	·····	3 2 2 3 1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		 ≥≥
		ي. چين
B. If amending the registered agent and/or registered office advergistered agent and/or the new registered office address here:	dress on our records, enter	the name of the nev
registered agent and/or the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
·	, 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 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>	Address	Type of Action
MGR	SHARON PATTERSON	44 SW 15TH COURT BOCA RATON, FL 33486	Add ✓ Remove
			Add Remove
 			Add Remove
······································	.		Add Remove
			Add Remove
<u></u>			Add Remove
D. If amend		ge(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE SIVE BY SE CONTRATIONS TO MAY 18 AM 9: 50
	• •	er or authorized representative of a member	pana, pappinga ata
		MANDY ROBIN d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00