L050000/259

| (Requestor's Name) | | | | |
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| (Address) | | | | |
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| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE ALLAHASSEE, FLORIDA FILED

COVER LETTER

| Division of Corporations | |
|--|---|
| SUBJECT: DOCHESTER ESTATES, 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: | |
| AMANDA J. COOPER | |
| (Name of Person) | • |
| DORCHESTER ESTATES, LLC | |
| (Firm/Company) | |
| 10177 SW 49TH AVENUE 우큐 송 📑 | |
| OCALA, FL 34476 | |
| OCALA, FL 34476 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| JOHN Q. ADAMS II, CPA at (352) 237-3200 | |
| (Name of Person) (Area Code & Daytime Telephone Number) | |
| | |
| Enclosed is a check for the following amount: | |
| \$25.00 Filing Fee \$30.00 Filing Fee \$ S55.00 Filing Fee \$ Certificate of Status \$ Certificate of Statu | |
| | |
| MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations | |

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)'
(A Florida Limited Liability Company)

DORCHESTER

| FIRST: | The Articles of Organization were filed on October 13 2005 and document number LOS 000101259 | and assigned | |
|----------|--|----------------------|----------------|
| SECOND: | This amendment is submitted to amend the following: | | |
| | ARTICIE V: ADD The following: | | - - |
| | Title: MGR | | _ |
| | Name: Amanda J. Cooper | SECRE | Π |
| | 10177 SW 49 + Avenue | ASS | |
| | Ocala, FL 34476 US | FE. F | |
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| • | | | _ |
| | | | |
| Dated OC | CTOBER 3 | | - - |
| | | | |
| | A J CODOR | | |
| | Signature of a member or authorized representative of a member | oer | |
| | AMANDA J. COOPER | | . , |
| | Typed or printed name of signee | | |

Filing Fee: \$25.00