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N COOPER MAR 2 1 2018 SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

T	Registration Section Division of Corporation	ons			
c		vestments LLC			
3	UBJECT:	Name of Limited Liability Company			
T	he enclosed Articles of Amend	ment and fee(s) are submitted for filing.			
P	lease return all correspondence	concerning this matter to the following:			
	Da.	niel J. Murray			
		Name of Person			
1	D 8	D Investments LLC			
	<u> </u>	Firm/Company			
	-	250 SW PALM COUR DR			
	. –	Address			
	Palm City / Florida 34990				
i	City/State and Zip Code				
	The	excorp@aol.com			
	or further information concerni	E-mail address: (to be used for future annual report notification)			
4	Daniel J. Murray	305 215-1500			
Ĭ		at ()			
	Name of Person	Area Code Daytime Telephone Number			
E	aclosed is a check for the follo	wing amount:			
		30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			
	MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee. Fi	rection Registration Section reporations Division of Corporations Clifton Building			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D & D Investments LLC (it ame of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on January 5, 2006 and assigned Florida document number L0600001602 This amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: n/a (Principal office address MUST BE A STREET ADDRESS) n/a - 4 7 PO BOX 1403 Enter new mailing address, if applicable: Palm City, Florida (Mailing address MAY BE A POST OFFICE BOX) 3499

B. If amending the registered agent and/or registered office address on our records, enter the name of Theonew registered agent and/or the new registered office address here:

| Name of New Registered Agent: | New Registered Office Address: | New Registered Office

lew 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 spending or removed f	Authorized Pe	rson(s) authorized to mai	nage, <u>enter the title, name, and address (</u>	of each person being added
MGR = Ma $AMBR = Au$	inager thorized Mem	ber		
Title	<u>Name</u>		Address	Type of Action
AMBR		Daniel J. Thornhill	1864 SW Saint Andrews Drive	□ Add
	FINING	TRUST	Palm City, Florida 34990	■ Remove
				Change
 				
1				☐ Remove
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