100000003360

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





800070626418

U4/18/06--U1017--U16 **35.00

DIVISION OF CORPORATIONS

OF APR 18 AM 9: 56

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: D&M Holdings LLC	
	2
	5
(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:	ON
Please return all correspondence concerning this matter to the following:	.
Dmitry Stepensky (Name of Person)	35.20
DOMALI aldin ma LLO	
D&M Holdings LLC (Firm/Company)	
(Patte Company)	
1242 Bayview Way	
(Address)	
Mallington El 22/1/	
Wellington, Fl. 33414 (City/State and Zip Code)	
(Chyrotiae and 21p Code)	
For further information concerning this matter, please call:	
Dmitry Stepensky at 561 319-5598	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\sqrt{\$\$\\$30.00 Filing Fee & \sqrt{\$\$\\$55.00 Filing Fee & \sqrt{\$\$\\$60.00 Filing Fee,}	
Certificate of Status Certificate of Status (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: STREET/COURIER ADDRESS:	
Registration Section Registration Section	
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company)

D&M Holdings LLC

FIRST:	The Articles of Organization were filed on January 10, 2006 and assigned document number Low Social Low.	-
SECOND:	This amendment is submitted to amend the following:	-
	Name Change 29 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
	D&M Holdings of South Florida, LLC	SEP SEP
		200 200 200 200 200 200 200 200 200 200
	· · · · · · · · · · · · · · · · · · ·	OHS
	SET	٠.
		, ·- *
Dated		
Dated		
	The state of the s	
	Signature of a member or authorized representative of a member	
	Typed or printed name of signee	

Filing Fee: \$25.00