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**EXAMINER** 



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SECRETARY OF STATE
ALLAHASSEF FINALE

## **COVER LETTER**

TO:

Registration Section

Division	of Corporations					
SUBJECT:	Di	gnity, LLC				
	Name of Limited Liability Company					
The enclosed Artic	eles of Amendment and fee(s) are su	bmitted for filing.				
Please return all co	orrespondence concerning this matte	er to the following:				
		R. Keith Jackson				
		Name of Person				
	Dignity, LLC					
	Firm/Company					
	647 Oak Hollow Way					
	Address					
	Alta	monte Springs, FL 32714				
		City/State and Zip Code				
	13 16 13	rkjaxn@gmail.com (to be used for future annual report notific				
For further informa	e-man address: a	•	auony			
			263 E663			
R. Keith Jackson  Name of Person		at ( 321 ) 6  Area Code & Daytime	663-5663 Telephone Number			
Enclosed is a check	c for the following amount:					
\$25.00 Filing F	ce \$30.00 Filing Fee & 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)			
F E	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building	·			
Tallahassee, FL 32314		2661 Executive Cen	ter Circle			

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dignity		
(Name of the Limited Liability Compa (A Florida Limited )	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on February 10, 2000	6 and assigned
Florida document numberL06000014756		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applicable:	Dignity, LLC	
(Principal office address MUST BE A STREET ADDRESS)	647 Oak Hollow Way	IAL S
	Altamonte Springs, FL 32714	E S S
	Dimpite II C	P 19
Enter new mailing address, if applicable:	Dignity, LLC	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	647 Oak Hollow Way Altamonte Springs, FL 32714	
	Attamonte Springs, FL 32714	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	lress
	, 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

MGR Reginald H. Sterns, III 14335 Tilden Road Winter Garden, FL 34787	<u>Title</u>	Name	Address	Type of Action
Altamonte Springs, FL 32714 Remove  MGR Steven B. Wigle 2919 Carl Terrace 7 Add Orlando, FL 32804 Remove  MGR Alan G. Norris 37 Wisteria Drive 7 Add Remove  MGR Alan G. Norris 37 Wisteria Drive 7 Add Remove  Attach additional sheets, if necessary.)  Signature of a member of authorized representative of a member R. Keith Jackson	MGR	Reginald H. Sterns, III		
MGR Alan G. Norris  37 Wisteria Drive Debary, FL 32713    Add   Remove	MGR	Raymond K. Jackson	647 Oak Hollow Way Altamonte Springs, FL 32714	
Debary, FL 32713 Remove    Add   Remove	MGR	Steven B. Wigle		
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  Dated	MGR	Alan G. Norris		
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  Dated 13 September 2011  Signature of a member of authorized representative of a member  R. Keith Jackson	<del></del>			
Dated	<del> </del>			
Dated 13 September 7 (2011	D. If amendin	g any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	
Dated 13 September 7 (2011				<del>-</del>
Signature of a member of authorized representative of a member  R. Keith Jackson	Dated	13 September 7 (201		_
		1/6		

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Filing Fee: \$25.00