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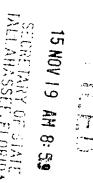
(Red	questor's Name)	
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PłCK-UP	(Address) (Address) (City/State/Zip/Phone #) PICK-UP	
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Special Instructions to F	Filing Officer:	
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COVER LETTER

TO: Registration Se Division of Cor		÷ .	بغ
D.Y. PERE SUBJECT:	EZ, L.L.C.		
SUBJECT:	Name of Lim	ited Liability Company	4.1.77
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Danny D. Perez		
		Name of Person	
	D.Y. Perez, LLC		
		Firm/Company	
	5456 Subdivision Road		
		Address	
	Ebro, Florida 32437		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	dannydperez@bellsouth.net	to be used for future annual report notific	antion)
For further information co	oncerning this matter, please ca	,	cation
Danny D. Perez		850 338-2230 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$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)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D.Y. PEREZ, L.L.C.		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on March 24, 2006	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		er the name of the n
Name of New Registered Agent:		HH 80
New Registered Office Address:		SSS TO TANK
	Enter Florida street address	19 A 17
	, Florida,	Zp Code
New Registered Agent's Signature if changing Pegistered Age	am*·	□ 69

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Sandra Ann Ohmer-Perez	5456 Subdivision Road, Ebro, Fl. 3	■ Add
			Remove
			Change
			□ Add
			☐ Remove
			Change
			Add
		 	Remove
	,		☐ Change
			□ Add
		·	☐ Remove
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			Remove
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be p		1 00	(optional)		
If the date inserted in this block does not meet the apprent's effective date on the Department of State's recomment.	olicable statutor	y filing requirement	ents, this date	will not	be listed
	,			, .	
ecord specifies a delayed effective date, but ie 90th day after the record is filed.	not an effec	tive time, at 1	2:01 a.m. (on the	earlie
, November 17 2015					
d	1				
Signature of a member or a	uthorized represe	ntative of a membe	r		

Page 3 of 3

Filing Fee: \$25.00