## L06000039132

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SECRETARY OF STATE
TALLAHASSEE, FLORID

CEC 1 7 2014

T. HAMPTON

## COVER LETTER

TO: Registration Se Division of Cor			
D&PC	oncessions, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Donald Reid		
		Name of Person	
	<del> </del>	Firm/Company	<del></del>
	3909 Lake Padgett	Drive	
		Address	
	Land O Lakes, FL 3	4639	
	0-0	City/State and Zip Code	·
	P5 Reid @ aol	· CO M to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c		
Peggy Reid		813 235-8333	3
Name o	f Person	Area Code Daytin	e Telephone Number
Enclosed is a check for the	he 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 & P Concessions, LLC			<del></del>
(Name of the Limit	ted Liability Company : (A Florida Limited Liab	as it now appears on our rec ility Company)	ords.)
The Articles of Organization for this Limited L Florida document number L06000039132	iability Company we	ere filed on 4/23/2006	and assigned
This amendment is submitted to amend the foll-	owing:		
A. If amending name, enter the new name o	f the limited liabilit	y company here:	
The new name must be distinguishable and end with the	words "Limited Liability	Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	rable:		<b>D</b> S 7
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	or registered offic	e address on our reco	ords, enter the name of the new
New Registered Office Address:	3909 Lake Pa	dgett Drive	
		Enter Florida street ad	
	Land O Lakes		, Florida <u>34639</u>
		City	Zip Code
New Registered Agent's Signature, if changing I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	ed agent and agree per and complete pe istered agent as pro registered office at	erformance of my duties wided for in Chapter 60	s, and I am familiar with and 05, F.S. Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Donnald Reid	3909 Lake Padgett Drive	
		Land O Lakes, FL 34639	■ Remove
AMBR	Donnald Reid	3909 Lake Padgett Drive	■ Add
		Land O Lakes, FL 34639	Remove
MGR	Peggy Reid	3909 Lake Padgett Drive	■ Add
		Land O Lakes, FL 34639	☐ Remove
		<del></del>	□ Remove
			SECRET
			SECRETARY OF STATE TALLAHASSEE, FLORIDA
			Refere

	- MAN-	
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ne date this document is filed by the Flor		(optional) ot be more than 90 days after
he date this document is filed by the Flor lated Movember	rida Department of State)  2014  Reid	ot be more than 90 days after
he date this document is filed by the Flor Dated Donald	rida Department of State)  2014	ot be more than 90 days after

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