

LB6000050187

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(City/State/Zip/Phone #)

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(Business Entity Name)

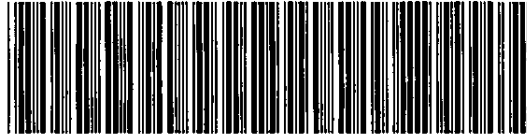
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 16 2015

N. CAUSSEAU

KATZ | BARRON
SQUITERO | FAUST

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SEVENTH FLOOR
MIAMI, FL 33133-5408

305-856-2444
305-285-9227 FAX

www.katzbarron.com

January 6, 2015

Via Federal Express

Registration Section
Division of Corporations
2661 Executive Center Circle
Clifton Building
Tallahassee, Florida 32301

RE: Filing of Articles of Amendment to Articles of Organization of DL/BK, LLC

To Whom It May Concern:


Enclosed please find a Cover Letter and original Articles of Amendment to Articles of Organization of DL/BK, LLC which we are submitting for filing.

Please return a certified copy of the filed Articles of Amendment to Articles of Organization of DL/BK, LLC to us in the enclosed prepaid Federal Express envelope.

Enclosed is a check in the amount of \$55.00 which covers the filing fee and certified copy fee for this request.

If you have any questions, please do not hesitate to contact me.

Very Truly yours,
KATZ BARRON SQUITERO FAUST


Ellen Rose, Esq.

ER/ac

Enclosure

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **DL/BK, LLC**

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:

Jonathan Feuerman

Name of Person

Therrel Baisden, P.A.

Firm/Company

One Southeast Third Avenue, Suite 2950

Address

Miami, Florida 33131

City/State and Zip Code

BUDDNIK@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan Feuerman

Name of Person

at (**305**) **371-5758**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

DL/BK, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on May 15, 2006 and assigned
Florida document number L06000050187.

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 end with the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	BUDD LITOWITZ	11401 S.W. 40TH STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33165	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated Oct. 14, 2014.



Signature of a member or authorized representative of a member

DONNA LITOWITZ

Typed or printed name of signee

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TALLAHASSEE, FLORIDA