L06000100855

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COVER LETTER

	stration Section of Corp				
SUDJECT.	.,	DAKC	TACO, LLC		
SUBJECT: _			ted Liability Company		
		Amendment and fee(s) are sub	_		
	•	S	5		
			Libo B. Fineberg		
			Name of Person	,	
		Law (Office of Libo B. Fineberg		
			Firm/Company		
		3500	3500 Gateway Drive, Suite 201		
			Address		
		Pomp	Pompano Beach, Florida 33069		
			City/State and Zip Code		
libolawyer@gmai			oolawyer@gmail.com to be used for future annual report notific	ation	
For further inf	Commetion o	oncerning this matter, please o		unon,	
roi iuiuiei iiii	Offination C	oncerning this matter, piease c		,	
		B. Fineberg	at (954) S Area Code & Daytime	975-6060	
	Name o	f Person	Area Code & Daytime	Telephone Number	
Enclosed is a	check for th	he following amount:			
\$25.00 Fil	ing 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)	
	Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURIE Registration Section Division of Corpora	1	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 OCT -1 AM 12: 04

DAKOTACO, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on10/17/2006 and assigned Florida document numberL06000100855
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
, Florida
City Zip Code New Registered Agent's Signature, if changing Registered Agent:

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

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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = 1	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Libo B. Fineberg	3500 Gateway Drive, Suite 201	Add Remove
		Pompano Beach, FL 33069	
MGR_	William N. Kale	2940 N Course Dr. Apt 307	✓ Add ☐ Remove
		Pompano Beach, FL 33069-3879	
			Add Remove
			Add Remove
			∏Add
			Remove
			Add
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets, if necessar	y.)
_			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
_			THE T
			- SERVE E
Dated	9-28,	2010	ERFLORIE
	Signature of a r	nember or authorized representative of a member	٦۶
		LIGO B. KWEBERG MANA	SON
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00