

LD7000048737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000157229290

07/06/09--01012--006 \*\*35.00

2009 JUL 16 AM 10:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

C. LEWIS

JUL 17 2009

EXAMINER

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: DAI, LLC

DOCUMENT NUMBER: LO7000048737

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AYODHA PERSAUD  
(Name of Contact Person)

DAI, LLC  
(Firm/ Company)

6100 NW 31 STREET  
(Address)

MARGATE, FL. 33063  
(City/ State and Zip Code)

For further information concerning this matter, please call:

AYODHA PERSAUD at ( 954 ) 977-2722  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 7, 2009

AYODHA PERSAUD  
DAI, LLC  
6101 NW 31 STREET  
MARGATE, FL 33063

SUBJECT: DAI, LLC  
Ref. Number: L07000048737

We have received your document for DAI, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 509A00023166

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DAI, 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:

AYODHA PERSAUD  
Name of Person

DAI, LLC  
Firm/Company

6101 NW 31 STREET  
Address

MARGATE FL. 33063  
City/State and Zip Code

daytonaaerospace@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AYODHA PERSAUD at (954) 977-2722  
Name of Person 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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED

2009 JUL 16 AM 10:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DAI LLC

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

The Articles of Organization for this Limited Liability Company were filed on MAY 08, 2007 and assigned  
Florida document number L07000048737.

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:**

*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

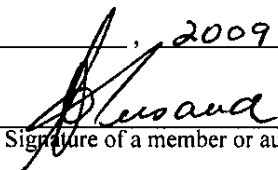
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	HENRY H. McFLIKER	508 South Military Trail DEERFIELD BEACH FL. 33442	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	AYODHA PERSAUD	508 SOUTH MILITARY TRAIL DEERFIELD BEACH FL. 33442	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	BEBE N. PERSAUD	508 SOUTH MILITARY TRAIL DEERFIELD BEACH FL. 33442	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	AYODHA PERSAUD	6101 NW 31 STREET MARGATE, FL 33063	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	BEBE N. PERSAUD	6101 NW 31 STREET MARGATE, FL. 33063	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated July 14, 2009

  
Signature of a member or authorized representative of a member

AYODHA PERSAUD

Typed or printed name of signee

FILED  
2009 JUL 16 AM 10:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA