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(Requestor's Name)	
(Address)	=
	Address)	
(City/State/Zip/Phone #)	
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(Document Number)	
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COVER LETTER

	egistration Se ivision of Cor						
SUBJECT	Danto Build	ders, LLC					
		Name of Lim	ited Liability Company				
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please retu	rn all correspo	ondence concerning this matter	to the following:				
		Craig Danto					
			Name of Person				
		Danto Builders, LLC					
			Firm/Company				
5601 Powerline Road - Suite 401							
			Address				
		Fort Lauderdale, FL 33309			~ 1	1133	
		mariana@dantobuilders.com	City/State and Zip Code		• • • • • • • • • • • • • • • • • • • •		٠.
		-	to be used for future annual	report notification	,	دَیَ	#1 · *
For further	information c	oncerning this matter, please co		'		 	
Mariana D			at ()	9-2006	 Q.5	บ <u>ส</u>	******
	Name o	f Person	Area Code	Daytime Telept	hone Number 1	ائ د.	
Enclosed is	a check for th	ne following amount:					
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc		S60,00 Filing Certificate of Certified Co (additional cop	of Status opy	

MAILING ADDRESS:

TO:

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

Danto Builders, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our re nited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Comp $\frac{L07000049594}{L07000049594}$	pany were filed on 05/10/2007	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	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 ADDRES.	<u>s)</u>	
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>		" (53 57 63
		<u></u>
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ords, tenter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ac	Idress
	City	, FloridaZip 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Deborah Danto	5601 Powerline Rd .Suite 401	∃ Add
		Fort Lauderdale, FL 33309	Remove
			□ Change
			□ Remove
			Change
			Remove
			☐ Change
			Add
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frective date, if other than the date of filing: $\frac{07/31}{2}$			_ (optional)		
an effective date is listed, the date must be specific and cannot be ote: If the date inserted in this block does not meet the a	e prior to date of filin applicable statutor	ig or more than 90 c y filing requireme	lays after filing ents, this date	.) Pursuan will not	it to 605,020° be listed as
ocument's effective date on the Department of State's rec	cords.				
e record specifies a delayed effective date, bu The 90th day after the record is filed.	it not an effect	tive time, at 1	2:01 a.m.	on the	earlier o
The John day after the record is filed.					
ated July 31 2017					
alco					
Signature of a member of	r authorized represen	ntative of a member	· -		
	•••				
Cizaia DAN Typed or	2 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				

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Filing Fee: \$25.00