

L070000099/67

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Y SULKER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Domain Investments, LLC

Signature _____

Requested by: SETH

11/13/17

Name _____

Date _____

Time _____

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____ Art of Inc. File _____
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____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Domain Investments, 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 09/27/2007 and assigned
Florida document number L07000099167.

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:

6560 West Rogers Circle, Suite 15

(Principal office address MUST BE A STREET ADDRESS)

Boca Raton, FL 33487

Enter new mailing address, if applicable:

6560 West Rogers Circle, Suite 15

(Mailing address MAY BE A POST OFFICE BOX)

Boca Raton, FL 33487

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 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

1

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated November 11, 2017

Jordan Levinson

Typed or printed name of signee

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	Phillips, Marlin	703 E Palmetto Park Road	<input type="checkbox"/> Add
		Boca Raton, FL 33432	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Phillips, Marlon	6560 West Rogers Circle, Suite 15	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33487	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
PRES	Levinson, Jordan	703 E Palmetto Park Road	<input type="checkbox"/> Add
		Boca Raton, FL 33432	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Levinson, Jordan	6560 West Rogers Circle, Suite 15	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33487	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

