## L08000000693

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		i e <sup>c</sup>

Office Use Only



400187330694

11/12/10--01010--008 \*\*25.00

10 NOV 12 PM 4: 01

11-15-10.03

## **COVER LETTER**

SUBJEC	T: DDO F	Properties LLC		
SOBOLO		ited Liability Company	<del></del>	
	sed Articles of Amendment and fee(s) are su			
Please re	urn all correspondence concerning this matte	r to the following:		
		Keily Snow Name of Person		
		DDO Properties LLC Firm/Company		
		1 min company		
		3056 New Bern Cove Address		٠ ا
		71001000	AHA Since	į . <b>–</b>
		Oviedo FL, 32765 City/State and Zip Code	——3SS. ∀&⊀ 7.1	
	Pi	•	SECHETARY OF STATE ALLAHASSEE, FLORIDA	
	E-mail address:	nilmiles72@yahoo.com (to be used for future annual report notification)	H: C STAT LORI	<b>'</b> 5
For furth	er information concerning this matter, please	call:	DA I	
	Kelly Snow Name of Person	at ( 407 ) 312-8371  Area Code & Daytime Telephone N	umber	
Enclosed	is a check for the following amount:			
<b>₹25.</b> 0	0 Filing Fee \$\bigcup \bigcup \\$30.00 Filing Fee &\bigcup Certificate of Status	Certified Copy Certified Copy (additional copy is enclosed) Certified Copy	00 Filing Fee, rtificate of Status rtified Copy ditional copy is e	
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	SS:	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DDO F	roperties LLC	· · · · · · · · · · · · · · · · · · ·	
(Name of the Limited Liability C (A Florida Lin	ompany as it now appear nited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Cor Florida document number <u>L0800000693</u>	npany were filed on	01/03/2008	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company her	<u>'e</u> :	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compa	nny," the designation "LI	.C" or the abbreviation
Enter new principal offices address, if applicable:		ĀĻ	3 <b>-</b>
(Principal office address MUST BE A STREET ADDRE.	<u>.</u>	LAHAS	<u> </u>
Enter new mailing address, if applicable:		יייי ביייי היייי הייייי	PM D
(Mailing address MAY BE A POST OFFICE BOX)		ORIDA	<u>.</u>
B. If amending the registered agent and/or register registered agent and/or the new registered office address  Name of New Registered Agent:  New Registered Office Address:		our records, <u>enter th</u>	e name of the nev
	En	ter Florida street addre	288
		, Florida	
	City		Zip Code

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.

New Registered Agent's Signature, if changing 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:

	= Manager M = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
····			— D
			□ n
	<del> </del>		
			<u>—                                    </u>
			Add Remove
			<u>— ~ </u>
D. Ifa	Kelly D. Miles is currently the I	r change(s) here: (Attach additional sheets	ingle menaber
	Kelly D. Snow.	ed on October 30th, 2010 and her n	new name is VOV 12
			PR 4: 0
Dated_	November 5th,	2010	A 2
	Signature of a	Member or authorized representative of a mem	ber
		Kelly D. Snow Typed or printed name of signee	·
		Typed or printed name of Signee	

Page 2 of 2

Filing Fee: \$25.00