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Office Use Only



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S. HAWKES
MAR 1 8 2009
EXAMINER

COVER LETTER

Division of Corporations			
SUBJECT: D+G TECHNologiE5 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:			
JOHN A KENWENTIN MEMR (Name of Person) Dt G TECHNULOGIRS LCC			
Dt G TECHNOLOGIES LCC (Firm/Company)			
Po Box 500013 (Address)			
(Address)			
MALABAR, AL 32950			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
TOHN A. KENNETY Jr. at 321, 987-1011 (Name of Person) (Area Code & Daytim) Telephone Number)			
(Mail of Colon)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			

TO: Registration Section

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

D+& TECHNOLOGIE		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our reability Company)	cords.)
The Articles of Organization for this Limited Liability Company	were filed on Jav22	2008 and assigned
Florida document number <u>LOB 200000 7248</u>	·	
		75 99 A
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
,	- 	57.4
The new name must be distinguishable and end with the words "Limit	ed Liability Company," the de-	signation "LLC" or the abbreviation
"L.L.C."		Single -
Enter new principal offices address, if applicable:	NIA	32 1557
(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 off	ico adduces on our macon	la autou the name of the new
registered agent and/or the new registered office address here		is, enter the name of the new
	4110	
Name of New Registered Agent:	W/A	
New Registered Office Address:		
	(Enter Florida street address)	
<u></u>	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	e to act in this canacity. It	further agree to comply with
the provisions of all statutes relative to the proper and compl	ete performance of my duti	es, and I am familiar with and
accept the obligations of my position as registered agent as p	rovided for in Chapter 608	, F.S. Or, if this document is

Page 1 of 2

(If Changing Registered Agent, Signature of New 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 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

Dated

MGRM = Managing Member <u>Title</u> <u>Name</u> Address **Type of Action** MERM HOWARD KELLY Remove Rémove ☐ Add Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 2 of 2

Filing Fee: \$25.00

KENNEDY JA.
Typed or printed name of signee