## Florida Department of State

Division of Corporations . Public Access System

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## DA WORX, LLC

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EXAMINER

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DA WORX, LLC		•	
(Name of the Limited Liability (A Florida)	Company as it now appears on imited Liability Company)	our records.)	<del> </del>
The Articles of Organization for this Limited Liability C	company were filed on 07/02/20	008	and assigned
Florida document number L08000064720	<u>.</u> .		•
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and end with the wor'L.L.C."	ds "Limited Liability Company,"	the designation "LL	C" or the abbreviat
Enter new principal offices address, if applicable:		<u> </u>	0
Principal office address MUST BE A STREET ADDI	(ESS)	<b>.</b>	
		<b>3</b> 3	Ē Ţ
	•	SSEE SY (	LE 22
Enter new malling address, if applicable:	-	in 6	
Malling address MAY BE A POST OFFICE BOX)		95	~ · · · · · · · · · · · · · · · · · · ·
· .	·	708 31. 31.	-:- -N
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered office add</li> </ol>		records, enter th	e name of the p
Name of New Registered Agent:		These are a second and a second a second and	
New Registered Office Address:			
	(Enter l	Florida street addr	ess)
	<u> </u>	, 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>	Name	Address	Type of Action
MGRM	DAVIAN SANTANA	209 E. PEARL STREET MINNEOLA, FL 34715 US	n☑ Add n☑ Remove
			Add Remove
	·		Add Remove
			Add Remove
<u></u>			Add Remove
	<u> </u>		Add Remove
D. If amendin	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary,	) 
<del></del> -		ASSEE, FLORI	-ILED
Dated	7/22 , 20	O <sub>m</sub>	8: <sub>1</sub> 27
_	Signature of a member	r or authorized representative of a member  Anthorized P. Orrese tuli	<u> </u>