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COVER LETTER

SUBJECT: D&D Investments of Southwest Florida, 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:	
Kurt S. Bauer	
(Name of Person)	
Buckman MacDonald & Bauer, PC	_
(Firm/Company)	3
	A manual
	O
(Address)	29
Holland, Michigan 49423	PH 12: 38
(City/State and Zip Code)	7
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For further information concerning this matter, please call:	C.S
Kurt S. Bauer at (616) 394-4276	
(Name of Person) (Area Code & Daytime Telephone Number)	
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)	

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&D Investments of Sort Name of the Limited Liabilit	uthwest Florida, LLC ly Company as it now appears on o	ur records.)	_
(A Florida	Limited Liability Company)		
The Articles of Organization for this Limited Liability (Company were filed on <u>July</u>	17, 2008 an	d assigned
Florida document number L08000069176	<u></u> .		•
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		, . .
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," th	ne designation "LLC" or	the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)	<u> </u>	
		ي ون ا	3
·			
Enter new mailing address, if applicable:			7
(Mailing address MAY BE A POST OFFICE BOX)			29
			P 1
		1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	7.7
B. If amending the registered agent and/or registered agent and/or the new registered office ade		cords, enter the nar	<u>ne, of the new</u>
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 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>Address</u> Type of Action **Title** Name ___ Add Remove ☐ Add Remove _ Add Remove □ Add Remove r Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) The mailing address of the Limited Liability Company is 2451 Van Ommen Drive, Suite B, Holland, MI 49424

Signature of a member or authorized representative of a member

Kurt S. Bauer

Typed or printed name of signee

2008

September 26

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Filing Fee: \$25.00