

L08000105143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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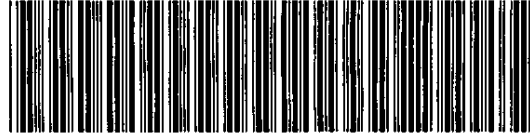
(Business Entity Name)

(Document Number)

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16 JUL 26 AM 9:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7/28/16 GS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 13, 2016

DWAYNE PIERSON  
2875 MEADOW LANE  
WESTON, FL 33331

SUBJECT: DPX CONSTRUCTION, LLC  
Ref. Number: L08000105143

FILED  
16 JUL 26 AM 9:24  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

We have received your document for DPX CONSTRUCTION, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The name of the entity cannot include "CORP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 316A00014637

2016 JUL 26 PM 1:27  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** DPX Construction, LLC

**DOCUMENT NUMBER:** L08000105143

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dwayne Pierson

Name of Contact Person

DPX Construction, LLC

Firm/ Company

2875 Meadow Lane

Address

Weston, FL 33331

City/ State and Zip Code

dpx1@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dwayne Pierson

at ( 305 )

345-7194

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
18 JUL 26 AM 9:24  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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

DPX Construction, 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 November 12, 2008 and assigned  
Florida document number L08000105143.

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:**

**(Principal office address MUST BE A STREET ADDRESS)**

15476 N.W. 77th Court, Suite #325

Miami Lakes, FL 33016

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

15476 N.W. 77th Court, Suite #325

Miami Lakes, FL 33016

**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**

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>                      |
|--------------|----------------|-----------------------------------|--------------------------------------------|
| CEO          | Dwayne Pierson | 2875 Meadow Lane                  | <input type="checkbox"/> Add               |
|              |                | Weston, FL 33331                  | <input type="checkbox"/> Remove            |
|              |                |                                   | <input checked="" type="checkbox"/> Change |
| President    | Denise Brown   | 15476 N.W. 77th Court, Suite #325 | <input checked="" type="checkbox"/> Add    |
|              |                | Miami Lakes, FL 33016             | <input type="checkbox"/> Remove            |
|              |                |                                   | <input type="checkbox"/> Change            |
|              |                |                                   | <input type="checkbox"/> Add               |
|              |                |                                   | <input type="checkbox"/> Remove            |
|              |                |                                   | <input type="checkbox"/> Change            |
|              |                |                                   | <input type="checkbox"/> Add               |
|              |                |                                   | <input type="checkbox"/> Remove            |
|              |                |                                   | <input type="checkbox"/> Change            |
|              |                |                                   | <input type="checkbox"/> Add               |
|              |                |                                   | <input type="checkbox"/> Remove            |
|              |                |                                   | <input type="checkbox"/> Change            |
|              |                |                                   | <input type="checkbox"/> Add               |
|              |                |                                   | <input type="checkbox"/> Remove            |
|              |                |                                   | <input type="checkbox"/> Change            |

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SECRET  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

SECRETARY GENERAL  
TALLINN, ESTONIA

18 JUL 26 AM 9

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SECRET  
TALLAHASSEE, FLORIDA

**E. Effective date, if other than the date of filing:** 5/1/16 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated June 21, 2016

Signature of a member

Signature of a member or authorized representative of a member

## Dwayne Pierson

Typed or printed name of signee