## 11214

(Requestor's Name)	_			
(Address)				
(Address)	_			
(City/State/Zip/Phone #)	_			
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status : 3	:			
Special Instructions to Filing Officer:				
•				
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AUG 25 2009

**EXAMINER** 



800159331148

08/24/09--01008--029 \*\*25.00

## **COVER LETTER**

•	TD	DTR, LLC	
SUBJECT:		ited Liability Company	· · · · · · · · · · · · · · · · · · ·
,			
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matter	r to the following:	
		Joseph E. Seagle	
		Name of Person	
	Joseph_E.	Seagle, PA - Registered Age	ent
		Firm/Company	
	92	24 West Colonial Drive	
		Address	<del></del>
	C	Orlando, Florida 32804	
		City/State and Zip Code	
	E-mail address: (	joe@seaglelaw.com to be used for future annual report notifica	ation)
For further informatio	n concerning this matter, please of	•	,
· 16	ocoph E. Sogglo	407 7	70.0100
Joseph E. Seagle  Name of Person		at (_407 ) 7  Area Code & Daytime	70-0100 Telephone Number
Enclosed is a check for	r the following amount:		
✓ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	ILING ADDRESS: istration Section	STREET/COURIE  Registration Section Division of Corporate	

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		DTR, LLC			
(Name of	the Limited Liability Co (A Florida Lim	mpany as it now app	oears on our records.)		
	(III torian cim	nou Buomity Compani	<i>)</i>		
The Articles of Organization for thi	s Limited Liability Com	pany were filed on _	December 8, 2008	and assig	ned
Florida document numberL	080000112145				
This amendment is submitted to am	end the following:				
A. If amending name, enter the n	ew name of the limited	l liability company	<u>here</u> :		
The new name must be distinguishable "L.L.C."	and end with the words	"Limited Liability Co	mpany," the designation "LL	C" or the ab	breviation
Enter new principal offices addre	ss, if applicable:				
(Principal office address MUST B.	EA STREET ADDRES	<u></u>			
					Z≥
				AUG	5 5 5 5 5 7 7 7
Enter new mailing address, if app	licable:			ಕ ನ	
(Mailing address MAY BE A POS		<u></u>		1-	
Triang add cos part Davis of	0111022011	<del></del>		<b>P</b>	!
				<del></del>	
B. If amending the registered	agent and/or registere	d office address o	n our records, enter th	e namecoof	the new
registered agent and/or the new r	egistered office addres	s here:	-		
Name of New Registered.	Agent:				<u></u>
New Registered Office Ac	dress:				
			Enter Florida street addre	?\$\$	
			, 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgr	Charles Kinyon	1107 W. Church Street Orlando, Florida 32805	Add Remove
			Add Remove
D. If amen	ding any other information,	enter change(s) here: (Attach additional sheets, if necess	ary.)
-			
	2-		
Dated		.2005	
		h.E. Searle Anthonized Representative of a member Typed or printed name of signee	•

Page 2 of 2

Filing Fee: \$25.00