

LO9000020258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

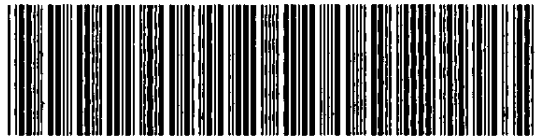
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

OCT 15 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DS&S INSTALLATION 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:

DEODAT JOSEPH

Name of Person

DS&S INSTALLATION LLC.

Firm/Company

1218 RAVIDA CIRCLE

Address

ORLANDO FL, 32825

City/State and Zip Code

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

For further information concerning this matter, please call:

DEODAT JOSEPH

Name of Person

at (407) 280-5823

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

Enclosed is a check for 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)

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 6, 2009

DEODAT JOSEPH  
1218 RAVIDA CIRCLE  
ORLANDO, FL 32825

SUBJECT: DS & S INSTALLATION LLC  
Ref. Number: L09000020258

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for DS & S INSTALLATION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 209A00032218

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

D S & S INSTALLATION 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 FEB. 2009. and assigned  
Florida document number 80-0358647

L09000020258

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 end with 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)

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

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

**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:

SHAM RAMKISSOON

New Registered Office Address:

8701 WELLESLEY LAKE DR. APT. 207

Enter Florida street address

ORLANDO

, Florida

32818

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.

[Signature]  
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> | <u>Name</u>      | <u>Address</u>   | <u>Type of Action</u>                   |
|--------------|------------------|--|---|
|              |                  |  | <input type="checkbox"/> Add            |
|              |                  |  | <input type="checkbox"/> Remove         |
| MGRM         | SHAM RAMKISSOON. | 8701 WELLESLEY LAKE DR.<br>APT. 207<br>ORLANDO, FL 32818 | <input checked="" type="checkbox"/> Add |
|              |                  |  | <input type="checkbox"/> Remove         |
|              |                  |  | <input type="checkbox"/> Add            |
|              |                  |  | <input type="checkbox"/> Remove         |
|              |                  |  | <input type="checkbox"/> Add            |
|              |                  |  | <input type="checkbox"/> Remove         |
|              |                  |  | <input type="checkbox"/> Add            |
|              |                  |  | <input type="checkbox"/> Remove         |

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

Dated

10/01/09.

Signature of a member or authorized representative of a member

DEODAT JOSEPH.

Typed or printed name of signee

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