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COVER LETTER

Registration Section
Division of Corporations

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT:	DG Ha	awthorne LLC					
	Name of Limi	ted Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return all corresp	ondence concerning this matter	to the following:					
	•	Jean Edwards Name of Person					
		Name of Person					
	(CSC Properties LLC					
•		Firm/Company					
· 4592 Ulmerton Road Suite 102							
		Address Clearwater FI 33762					
•							
		City/State and Zip Code					
	jear E-mail address: (1	jeanne@cscproperties.com E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please o	eall:					
Je	ean Edwards	at (727)	446-3444				
Name of Person		Area Code & Daytime Telephone Number					
Enclosed is a check for	the following amount:						
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				

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

		orn LLC			
(Name of the Limited Liab (A Flori	ility Compar da Limited L	ny as it now appears iability Company)	on our records.		
The Articles of Organization for this Limited Liabilit Florida document number		were filed on	5/14/2009	and assigned	
This amendment is submitted to amend the following	g :				
A. If amending name, enter the new name of the	limited liab	ility company here	:		
The new name must be distinguishable and end with the "L.L.C."	words "Limi	ted Liability Compar	ny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		4592 Ulmerto	n Road		
(Principal office address MUST BE A STREET AD	DRESS)	Suite 102			
		Clearwater FL	33762		
Enter new mailing address, if applicable:		4592 Ulmertor	n Road		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	Suite 102			
		Clearwater FL 33762			
B. If amending the registered agent and/or re registered agent and/or the new registered office a	_		ur records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:			Ž.	SF 99	
New Registered Office Address: 45	92 Ulmer	ton Road Suite			
			er Florida street a		
		learwater	, Florida 💥	37376 2	
New Registered Agent's Signature, if changing Regist		City	FLORIDA	∰ ©	
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the registered	r and comp d agent as p	lete performance d provided for in Ch	of my duties, and I a apter 608, F.S. Or,	m familiar with and if this document is	

company has been notified in writing of this change.

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>	Address	Type of Action
MGR	CSC Properties Inc	235 N Garden Ave Clearwater FL 33755	Add ✓ Remove
MGRM	CSC Properties LLC	4592 Ulmerton Road Suite 102 Clearwater FL 33762	Add Remove
			Add Remove
			Add Remove
			Add
	~		Add
D. If amend	ling any other information, enter cha	unge(s) here: (Attach additional sheets, if necessor	ary.)
_			O9 AI
Dated	,		FILED 9 AUG IL AH S SECRETARY OF S ALLAHASSEE FL
	(See	aber or authorized representative of a member Am eS W oed or printed name of signee	OF S AND SANDER OF S AND S A
	Tyl	oed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00