

L09000108808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

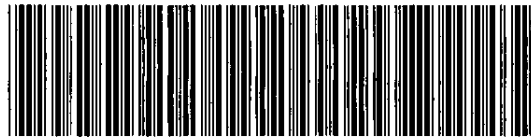
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800163983828

01/06/10--01024--016 **30.00

FILED
2010 JAN -6 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

JAN 7 2010

EXAMINER

SDV Services LLC

A Service Disabled Veteran Owned Business
5220 S. Washington Ave
Titusville, FL 32780
(321)267-7073/Fax: 267-2211



December 30, 2009

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Addition of Managing Member

Please find enclosed our request to add Mr. Donald M Dansby as Member and remove Franklin D. Kelley as a Member of this corporation.

Should you have any questions regarding this request, please contact me at (321)267-7073.

Thank you for your prompt attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Nicole Lochary". The signature is fluid and cursive, with a large loop at the end.

Nicole Lochary
Contract Administrator

Enclosure: Article of Amendment

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SDV Services 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:

Nicolle Lochary

Name of Person

SDV Services LLC

Firm/Company

5220 S Washington Ave

Address

Titusville, FL 32780

City/State and Zip Code

nicolle@suifl.com

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

For further information concerning this matter, please call:

Nicolle Rice Lochary

Name of Person

at (321)

267-7073

Area Code & Daytime Telephone Number

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

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

FILED

2010 JAN -6 PM 4:47

SDV Services LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on November 12, 2009 and assigned
Florida document number L09000108808.

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)

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 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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgr	Donald M Dansby	5220 S Washington Ave	<input checked="" type="checkbox"/> Add
		Titusville, Fl 32780	<input type="checkbox"/> Remove
Mgr	Franklin D Kelley II	5220 S Washington Ave	<input type="checkbox"/> Add
		Titusville, Fl 32780	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated December 29, 2009



Signature of a member or authorized representative of a member

Kenneth R Tipton

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

FILED
2010 JAN -6 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA