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(((H23000340206 3)))



H230003/07053ABCU

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KIM MARKS CPA Account Number : 120120000072 Phone : (305)895-5815 Fax Number : (305)895-6273

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Help

SEP 28 2023 K. Brumble)

From: DAVITA SYFER!

Fax: 13058956273

company has been notified in writing of this change.

To: '18506176383@RCFAX.COM'Fax; (850) 617-6383

ARTICLES OF AMENDMENT T() ARTICLES OF ORGANIZATION OF

H 23000 340206 3

DOTPHINS 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 11/24/2009 and assigned Florida document number L09000113148 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Glehns LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 BON) 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 uddress 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. Thereby confirm that the limited liability 🕮

If Changing Registered Agent, Signature of New Registered Agent

From: DAVIZA SYFERE

Fax: 13058956273

To: '18506176383@RCFAX.COM'Fax (850) 617-6383

Page: 4 of 5

09/27/2023 3:14 PM

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H230003402063

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
			JAdd
			[]Change
			□Remove
			DChange

			□Кетюче
			DChange
			□Add
	•••••	Tilkemove	
			□Change
			□Add
			□Remove
			CJAdd
			Петюvе
			□Change

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lian efi <u>Note:</u>	tive date, if other than the date of filing:
r recor	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 d.
	September 27 j 2023
Dated	Hamil Lauren
Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00