## L09000121512

(Requestor's Name)				
(Address)				
·				
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PICK-UP WAIT MAIL				
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(Document Number)				
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## **COVER LETTER**

· TO: "

	Registration Section Division of Corporations	
SUBJEC'	r: DMG Asset Management, LLC	
502020	Name of Limited Liability Company	
The enclo	sed Articles of Amendment and fee(s) are submitted for filing.	
Please ret	urn all correspondence concerning this matter to the following:	
	Cragon, Domina	
	Gregory Damiani  Name of Person	-
		7201 7A
·	Damiani & Weissman, PA	
•	Firm/Company	2010 MAR 30 SECRETARY TALLAHASS
	4558 N. University Drive	مهيد اسار ا
	Address	
	Lauderhill, FL 33351	PH : 05
	City/State and Zip Code	- ਫ਼ਿਜ਼ਾਂ ਲੋ
	gd@dwpa.net	
	E-mail address: (to be used for future annual report notification)	•
For furthe	r information concerning this matter, please call:	
	Gregory Damiani at ( 954 ) 747-5280	·
	Name of Person Area Code & Daytime Telephone Number	<b>.</b>
Enclosed	is a check for the following amount:	
\$25.00	(additional copy is enclosed) Certifie	ate of Status &
	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

DMG Asset	Management,	LLC			
(Name of the Limited Liability C (A Florida Lin	Company as it now apprinted Liability Compan	ears on our record	<u>ls.</u> )		
The Articles of Organization for this Limited Liability Cor	npany were filed on _	December 22	, 2009	and assi	gned
Florida document number L09000121512	,				
•					
This amendment is submitted to amend the following:					
A 16 Call V-4-	3 12 - 1. 124	<b>.</b>			
A. If amending name, enter the new name of the limite	d liability company	<u>nere:</u>			•
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Co	mpany," the designa	tion "LLC	" or the al	bbreviatio
•				• •	
Enter new principal offices address, if applicable:			È (:)	- 21	
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>			20101	
·				HAR	
			SS.	ဋ္ဌာ	P
Enter new mailing address, if applicable:			(L)O		
(Mailing address MAY BE A POST OFFICE BOX)				32	()
	<del></del>		ZΑ	 G	Contract
		· · · · · · · · · · · · · · · · · · ·	7>	ത	
B. If amending the registered agent and/or register	ed office address o	n our records, <u>e</u>	nter the	name_of	f the nev
registered agent and/or the new registered office addre	ss here:				
		•			
Name of New Registered Agent:					
New Registered Office Address:					
New Registered Office Address.		Enter Florida stre	et address	<u> </u>	
	,	, mare - 1	•		
	 City	, Flori		Zip Code	
,	C.1.y		-	Joue	

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 Address **Type of Action Title** Name David J. Berman MGRM 4556 N. University Drive Lauderhill, FL 33351 ☐ Add Remove Add. Remove ☐ Add Remove 2 **Remove** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 29, Dated\_ and a member or authorized representative of a member Gregory Damiani Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00