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(Requestor's Name)



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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Woods
Weidenmiller
Michetti

October 29, 2013

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

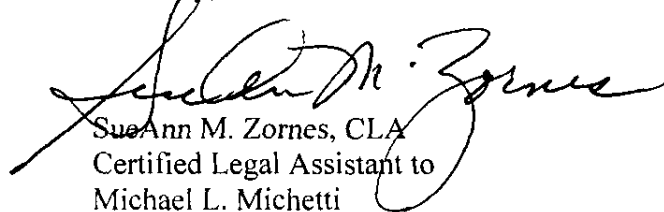
Re: Dantes Properties, LLC
Our file no.: 10228-001

To Whom This May Concern:

In connection with the above-referenced matter, enclosed is this firm's operating account check number 5054 in the amount of \$25.00 which represents the filing fee.

If you should have any questions or concerns with this matter, please feel free to contact us.

Sincerely,



Sue Ann M. Zornes, CLA
Certified Legal Assistant to
Michael L. Michetti

SMZ/smr
enclosure

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DANTES PROPERTIES, 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:

Michael L. Michetti, Esq

Name of Person

WOODS, WEIDENMILLER & MICHETTI PL

Firm/Company

5150 TAMiami TRAIL N SUITE 603

Address

NAPLES, FL 34103

City/State and Zip Code

mmichetti@lawfirmnaples.com

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

For further information concerning this matter, please call:

Michael Michetti

Name of Person

239 325-4070

at ()

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**

DANTES PROPERTIES, 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 03/01/2010 and assigned
Florida document number L10000022780.

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)

450 Alton Road, #1410

Miami Beach, FL 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

450 Alton Road, #1410

Miami Beach, FL 33139

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

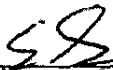
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The Address of the current Managing Member should be changed to:

450 Alton Road, #1410

Miami Beach, FL 33139

Dated _____, _____.



Signature of a member or authorized representative of a member

Eric David Spencer

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 NOV -1 AM 9:46
FALLS CHURCH, VA
CLERK OF COURT