

L10000054439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

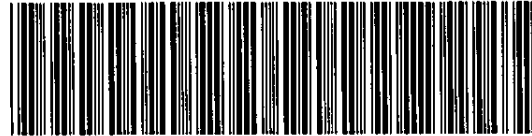
(Business Entity Name)

(Document Number)

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CLERK OF COURT
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DMGL Consulting Group, 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:

Lawrence D. Van Ore

Name of Person

DMGL Consulting Group, LLC

Firm/Company

9324 Hidden Water Circle

Address

Riverview, FL 33578

City/State and Zip Code

ldvanore@hotmail.com

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

For further information concerning this matter, please call:

Lawrence Van Ore

at (813) 626-4057

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2014 DEC -8 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

DMGL Consulting Group, 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 May 19, 2010 and assigned
Florida document number L10000054439.

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)

9324 Hidden Water Circle

Riverview, FL 33578

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9324 Hidden Water Circle

Riverview, FL 33578

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:

Lawrence D. Van Ore

New Registered Office Address:

9324 Hidden Water Circle

Enter Florida street address

Riverview

City

Florida 33578

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 605, 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.

Lawrence D. Van Ore
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Glen F. Jacobs		<input type="checkbox"/> Add
		2003 Snook Dr.	<input checked="" type="checkbox"/> Remove
		Deltona, FL 32738	
MGR	Lawrence D. Van Ore	9324 Hidden Water Circle	<input checked="" type="checkbox"/> Add
		Riverview, FL 33578	<input type="checkbox"/> Remove
MGRM	Lawrence D. Van Ore	3835 Biscayne Dr	<input type="checkbox"/> Add
		Winter Springs, FL 32708	<input checked="" type="checkbox"/> Remove
MGRM	Daryl B. Jacobs	1615 Wood Duck Dr.	<input type="checkbox"/> Add
		Winter Springs, FL 32708	<input checked="" type="checkbox"/> Remove
MGRM	Daryl B. Jacobs	1188 Groveland Dr	<input checked="" type="checkbox"/> Add
		Chuluota, FL 32766	<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.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated NOVEMBER 9, 2014 (11-09-2014)



Signature of a member or authorized representative of a member

Lawrence D. Van Ore

Typed or printed name of signee

2014 DEC -8 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA