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- (((H10000177157 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

: LIGHTSEY & ASSOCIATES, PA

Account Number : 120060000130 Phone

: (407)622-0025

Fax Number

: (407)622-0026

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DBS HOSPITALITY, LLC

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D. BRUCE

AUG 0 6 2010

EXAMINER

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Enter riorida street adaress	
Now Registered Office Address:	Enter Florida street address	_
Name of New Registered Agent:		
registered agent and/or the new registered office address	ed office address on our records, enter the name of the is here:	Devy
	□ □ □ □	
(Mailing address MAY BE A POST OFFICE BOX)		Ta
Enter new mailing address, if applicable:	ARY SSEE	F
	<u> </u>	[]
(Principal office address MUST BE A STREET ADDRE	m	
Enter new principal offices address, if applicable:		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbrevia	ation
A. If amending name, enter the new name of the limite	d liability company here:	
This amendment is submitted to amend the following:		
Florida document numberL10000071424		
The Articles of Organization for this Limited Liability Con	npany were filed onJULY 6, 2010 and assigned	
(A Florida Lii	nited Liability Company)	
(Name of the Limited Liability (ompany as it now appears on our records.) nited Liability Company)	

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, Stanstore of New Registered Agent

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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 = Ma MGRM = I	anager Managing Member		
Title	Name	Address	Type of Action
MGR_	ISHWAR NARAN	930 North Atlantic Ave. Daytona Beach, Florida 32118	Add Remove
MGR	SAMIR NARAN	930 North Atlantic Ave. Davtona Beach, Florida 32118	
			Add Remove
			Add Remove
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	Add Remove
·*			Add Remove
D. If smen	ding any other information, enter o	change(s) here: (Attach additional sheets, if necessar	10 AUG
<u>-</u>			-5 M 9:1
Dated	AUGUST 5	2010 ember or authorized representative of a member	
	ALTON L. LIGHTS	SEY, AUTHORIZED REPRESENTATIVE	·

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Filing Fee: \$25.00