

L100000075510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

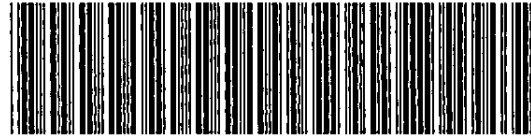
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DEPT. OF STATE  
TALLAHASSEE, FLORIDA

2013 JUL 30 AM 8:51

FILED

J. SAULSBERRY  
EXAMINER

JUL 30 2013



**Schenk & Associates, PLC**  
Counselors at Law

July 19, 2013

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

**Re: Damman Risohorse LLC – Amendment to Articles of Organization**

Dear Sir or Madam:

Attached please find check # 5564 from Schenk & Associates, PLC in the amount of \$25.00, issued to "Florida Department of State" and the completed and signed Articles of Amendment to the Articles of Organization of Damman Risohorse LLC.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Maximilian Schenk, Esq.  
Schenk & Associates, PLC  
Tel. 305-444-2200  
Fax 305-444-2201  
[mjs@schenk-law.com](mailto:mjs@schenk-law.com)

Attachments – As referenced

6-11-13  
2013 JUL 30 AM 8:51  
FLORIDA DEPT OF STATE  
CORPORATION DIVISION

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Damman Risohorse 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:

**Maximilian Schenk, Esq.**

Name of Person

**Schenk & Associates, PLC**

Firm/Company

**999 Brickell Ave., Ste. 820**

Address

**Miami, Florida 33131**

City/State and Zip Code

**mjs@schenk-law.com**

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

For further information concerning this matter, please call:

**Maximilian Schenk**

Name of Person

at **(305) 444-2200**

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

2013 JUL 30 AM 8:51  
TALLAHASSEE, FL  
DIVISION OF CORPORATIONS  
REGISTRATION SECTION

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

Damman Risohorse 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 July 19, 2010 and assigned  
Florida document number L10000075510.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

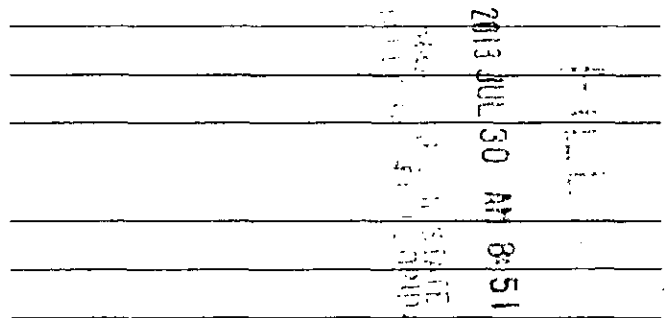
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**



**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: N/A

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Klaus Dammann	444 Brickell Ave., Ste. 51132	<input type="checkbox"/> Add
		Miami, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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CLERK OF COURT  
CLERK OF COURT  
CLERK OF COURT

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

N/A

Dated

28 June, 2013



Signature of a member or authorized representative of a member

Hans Ohlhaber, MGRM

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE FLORIDA