

8/23/22, 1:54 PM

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**L10 00007620**

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(((H22000285272 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

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Account Name : CRARY, BUCHANAN, BOWDISH, ET AL
Account Number : 076424001425
Phone : (772)233-4602
Fax Number : (772)398-8122

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

Email Address: SDOBBS@STEVEDOBBSENGINEERING.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
STEVEN L. DOBBS ENGINEERING, LLC**

Certificate of Status	0
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August 24, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

STEVEN L. DOBBS ENGINEERING, LLC
1062 JAKES WAY
OKEECHOBEE, FL 34974

SUBJECT: STEVEN L. DOBBS ENGINEERING, LLC
REF: L10000077620

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please have Steven L Dobbs sign the last page of the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

FAX Aud. #: B22000285272
Letter Number: 022A00018859

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STEVEN L. DOBBS ENGINEERING, 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 07/23/2010 and assigned
Florida document number L10000077620.

This amendment is submitted to amend the following:

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

DOBBS ENTERPRISES, LLC

The new name must be distinguishable and contain 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:

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 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.

If Changing Registered Agent, Signature of New Registered Agent

(((H22000285272 3)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	STEVEN L. DOBBS	1062 JAKES WAY	<input type="checkbox"/> Add
		OKEECHOBEE, FL 34974	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	HEATHER A. SILER-DOBBS	1062 JAKES WAY	<input type="checkbox"/> Add
		OKEECHOBEE, FL 34974	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _____ AUGUST 23 2022

Steven J. Galt

Signature of a member or authorized representative of a member

STEVEN L. DOBBS

Typed or printed name of signee

Filing Fee: \$25.00
(((H22000285272 3)))