L10000078089

(Re	equestor's Name)		
(Ad	idress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



800214083338

11/09/11--01006--021 **25.00

FILED

11 NOV -9 PM 1: 09

SECRETARY OF STATE
ALLAHASSEF, FIRED

ALLAHASSEF, FIRED

D. BRUCE NOV 1 0 2011

EXAMINER

COVER LETTER

ΓΘ: Registration Division of Control	section Corporations		
SUBJECT:	DO	DOSH LLC	
SUBJECT:		nited Liability Company	AND THE PARTY OF T
The enclosed Articles	of Amendment and fee(s) are su	abmitted for filing.	
Please return all corre	spondence concerning this matter	er to the following:	
		lan Hurlstone Name of Person	
		Name of Person	
		DOOSH LLC	
		Firm/Company	
		P _c ,	
		Address	ECR
	Mia	ami Beach, Florida 33139	NOV -9 PM 1: CRETARY OF ST LAHASSEE. FLO
		City/State and Zip Code	RY SEE
	F-mail address:	hurlstone@gmail.com (to be used for future annual report notification)	
For further information	on concerning this matter, please		V-9 M I: 09 TARY OF STATE HASSEE, FLORIDA
	lan Hurlstone	at (_727)331-7389	<u> </u>
Nam	ne of Person	Area Code & Daytime Telephone N	lumber
Enclosed is a check for	or the following amount:		
₹25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	00 Filing Fee, rtificate of Status & rtified Copy Iditional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	DOOS Liability Compa Florida Limited I	H LLC ny as it now appears on our Jability Company)	records.)		
The Articles of Organization for this Limited Li Florida document numberL10000078	• • •	were filed on July	26, 2010	and assigned	
This amendment is submitted to amend the follo	wing:	•			
A. If amending name, enter the new name of	the limited liah	ility company here:			
The new name must be distinguishable and end with "L.L.C."	n the words "Limi	ited Liability Company," the	designation "	1.1.C" or the abbrevi	iation
Enter new principal offices address, if applicable:		1521 Alton Rd. #66	5	,1	
(Principal office address MUST BE A STREE		Miami Beach, Florid	la 33139	<u> </u>	-
		**************************************		A. €	5 -
Enter new mailing address, if applicable:		A S S S 1521 Alton Rd. #665		TARY ASSEE	» [
(Mailing address MAY BE A POST OFFICE BOX)		Miami Beach, Florid	la 33139	<u> </u>	<u> </u>
B. If amending the registered agent and/o			ords, enter	OR IDA	new
registered agent and/or the new registered of Name of New Registered Agent:		e offices of wice	k SPRAT	OLin , PIIC	
New Registered Office Address:	18952	N. Dwe Habr			
	Enter Florida street address				
	101	2	, Florida	33548	•
		Ciry	, Florida 33548 Zip Code		
New Registered Agent's Signature, if changing I	legistered Agent	ı			
I hereby accept the appointment as registered	d agent and acr	ree to act in this capacity.	I further as	gree 10 comply wil	th

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.

Page 1 of 2

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:

	= Manager 1 = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	400 400 400 400 400 400 400 400 400 400		Add Remove
			Add Remove
A-4-12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Account to the second s		Add Remove
ota naziona del Pallistica Polici			Add Remove
			Add Remove
D. If a	mending any other information, enter chan	nge(s) here: (Attach additional sheets, if necessary.) naging Member:	1
	New address for Ian Hurlstone, Mai 1446 Ocean Drive #35, Miami Beac		-9 R :: 10 TARY OF STATE ASSEE, FLORID
Dated _	October 31 , 20	<u>011</u> .	
	Signature of a member	er or authorized representative of a member	
	•	lan Hurlstone	
	1 ype	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00