L10000097690

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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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2022 APR 25 AH IO: 30 SECRETARY OF STATE TALLAHASSEE, FL

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MAY 0 2 2022



March 31, 2022

THERESA MONTERO 13500 POWERS CT, STE 200 FT MYERS, FL 33912

SUBJECT: DWYER GENERAL LLC

Ref. Number: L10000097690

We have received your document for DWYER GENERAL LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 422A00007580

COVER LETTER

	legistration Se Division of Cor			
oun irea		ENERAL, LLC		
SUBJECT	Γ;	Name of Lim	ited Liability Company	<u> </u>
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please rett	ırn all correspo	indence concerning this matter	to the following:	
		THERESA MONTERO		
			Name of Person	
		DWYER GENERAL, LLC		
		····	Firm/Company	
		13500 POWERS CT., SUI	TE 200	
			Address	
		FORT MYERS, FL 33912		
			City/State and Zip Code	
			NTEROPTECHNOLOGIES.COM	
For further	r information c	e-mail address: (oncerning this matter, please of	to be used for future annual report not	meanon)
		oneering in maner, prease of		
————	A MONTERO		at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed i	is a check for th	ne following amount:		
□ \$25.00	0 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)
K	<u>lailing Addres</u> Registration S	Section	Street Address: Registration Se	
	Division of C P.O. Box 632	•	Division of Co The Centre of	
	Tallahassee, I			pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT | ED TO TO ARTICLES OF ORGANIZATION 25 AM 10: 30 OF 2022 APR 25

DWYER GENERAL, LLC

SECRETARY OF STATE TALLAHASSEE, FL

(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 I Florida document number L10000097690	iability Company were file	ed on SEPTEMBER 17, 2010	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability con	npany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	·	
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or	registered office address	on our records, <u>enter the n</u>	ame of the new registered
agent and/or the new registered office addre	ess here:		
Name of New Registered Agent:	THERESA MONTERO		
New Registered Office Address:	13500 POWERS CT., S	UITE 200 Enter Florida street address	
	FORT MYERS	, Florida	33966
	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.

lf Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
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			☐ Change
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flective date, if other than th an effective date is listed, the date in	e date of filing:ust be specific and cannot be prior to date.	(optional) of filing or more than 90 days after filing.) Pursuant to 605.0207
Sote: If the date inserted in this becoment's effective date on the learning or the learning	block does not meet the applicable sta	atutory filing requirements, this date will not be listed as
ocument serietive date on the	repairment of state a records.	
record specifies a delayed effect d is filed.	ive date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90th day after the
ated APRII. 19	2022	
	M4 Signature of a member or authorized re	
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Filing Fee: \$25.00

Typed or printed name of signee