

L110000021066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entry Name)

(Document Number)

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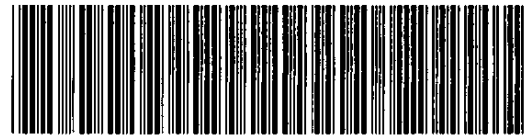
Special Instructions to Filing Officer:

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DEC -9 2011

EXAMINER

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2011 DEC -8 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DGA DESTINY PROPERTY + LANDSCAPE SERVICE 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:

DAVID J. GLASBY
Name of Person

GLASBY GOLF SERVICES, LLC
Firm/Company

2641 N. FLAMINGO RD #1807
Address

PLANTATION, FL 33323
City/State and Zip Code

daglasby@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID J. GLASBY at (813) 494.4889
Name of Person 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

PGA DESTINY PROPERTY + LANDSCAPE SERVICE 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 DECEMBER 14TH 2011 and assigned
Florida document number L11000021066 02/18/2011 oxy

This amendment is submitted to amend the following:

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

GLASBY GOLF SCHOOLS LLC.

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)

2641 N FLAMINGO RD #1807
PLANTATION, FL 33323
RECEIVED
CLERK OF STATE
TALLAHASSEE, FLORIDA
2011 DEC 18 PM 1:00
FILED

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2641 N. FLAMINGO RD #1807
PLANTATION, FL 33323

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:

DAVID J. GLASBY

New Registered Office Address:

2641 N. FLAMINGO RD #1807

Enter Florida street address

PLANTATION

City

, Florida

33323

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.

[Signature]
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>
MGR	RUSSELL GLASBY	2641 N. FLAMINGO RD #1807 PLANTATION, FL 33323	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

FILED
20 DEC -8 PM 1:08
CLERK OF STATE
TALLAHASSEE FLORIDA

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

Dated 12/4/11

[Signature]
Signature of a member or authorized representative of a member

DAVID J. GLASBY
Typed or printed name of signee