## L110000239510

(Re	equestor's Name)		
(Ac	idress)		
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

C. LEWIS

JAN 2 3 2012

EXAMINER

3

## **COVER LETTER**

Division of Co					
SUBJECT:	Dolomite i	Enterprises, LLC			
		ted Liability Company			
	Amendment and fee(s) are sub ondence concerning this matter				
		David Bassett			
		Name of Person			
Dolomite Enterprises, LLC					
		Firm/Company			
	2301 Foxboro Court				
		Address			
		(issimmee, FL 34746			
		City/State and Zip Code			
	E-mail address: (	bassett2@gmail.com to be used for future annual report noti	fication)		
For further information	concerning this matter, please c	eall:			
D	avid Bassett	<sub>at (</sub> 321 <sub>)</sub>	806-7513		
Name o	of Person	Area Code & Daytime Telephone Number			
Enclosed is a check for t	the following amount:				
\$25.00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
34 4 11	INC ADDRESS.	STOFFT/COUD	IFD ADDRESS		

**MAILING ADDRESS:** 

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2012 JAN 20 PM 1: 13

	Dolomite E	nterprises LLC	SECRETARY	OF STATE
(Name of	Dolomite E the Limited Liability Con (A Florida Limit	npany as it now appe ed Liability Company	ars on our records:3000	FLORIDA
The Articles of Organization for this				
Florida document numberL	11000029510			
This amendment is submitted to ame	end the following:			
A. If amending name, enter the n	ew name of the limited	iability company h	e <u>re</u> :	
The new name must be distinguishable "L.L.C."	and end with the words "I	imited Liability Com	pany," the designation "LL	C" or the abbreviation
Enter new principal offices addre	ss, if applicable:			<u>.                                    </u>
(Principal office address MUST Bl	E A STREET ADDRESS	2		
		<del></del>		
Enter new mailing address, if app	licable:			
(Mailing address MAY BE A POST	T OFFICE BOX)	<del></del>		
			<u> </u>	
B. If amending the registered a registered agent and/or the new re			our records, enter th	e name of the new
N (N P ' )	•			
Name of New Registered	Agent:			
New Registered Office Ad	dress:		Inter Florida street addre	ess
	<del></del>	City	, Florida	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Daniel Bassett	2301 Foxboro Court Kissimmee, FL 34746	Add Remove
MGR	Bethany Bassett	2301 Foxboro Court Kissimmee, FL 34746	Add ☐ Remove
<del></del>			Add Remove
٠			Add Remove
			Add Remove
			Add Remove
D. If amen		change(s) here: (Attach additional sheets, if necessor	ary.)
-			2012 JAN 2
Dated	January 14	2012	20 M I: 13
	Signature of a	member or authorized representative of a member  David Bassett	<del>- 5</del>
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00