L11000029510

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c/ 9/12/2022

COVER LETTER

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SUBJI	ECT: DOLON	MITE ENTERPRISES	, LLC	2022 JUN 13 PM	12: 4
		(valie of Ellis	ned blabinty company	-	- · · -
SURJECT: DOLOMITE ENTERPRISES, LLC Name of Limited Liability Company TALLAE ASSEL. FI The enclosed Articles of Amendment and fee(s) are submitted for filting. BETHANY BASSETT Name of Person DOLOMITE ENTERPRISES, LLC Firm/Company 1400 VILLAGE SQUARE BLVD. #3-80604 Address: City/State and Zip Code dolomitellc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: BETHANY BASSETT Name of Person at (850.) 417-8757 Area Code Doyline Telephone Number Enclosed is a check for the following amount: Cartificate of Status Mailing Address: Registration Section Division of Corporations P.O. Box 6327 The Centre of Tallahassee	Ž1 * +33.75				
SUBJECT:					
		BETHANY BASSE		 -	
The enclosed Articles of Amendment and fee(s) are submitted for filin Please return all correspondence concerning this matter to the followin BETHANY BASSETT Name of DOLOMITE ENTERPRISES Firm/Co 1400 VILLAGE SQUARE BL Addr TALLAHASSEE, FL 32312 City/State an dolomitellc@gmail.com E-mail address: (to be used for ft For further information concerning this matter, please call: BETHANY BASSETT Name of Person Are: \$25.00 Filing Fee \$30.00 Filing Fee \$30.00 Filing Fee & Certific (addition)		<u> </u>			
SUBJECT: DOLOMITE ENTERPRISES, LLC Name of Limited Liability Comp The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: BETHANY BASSETT Name of Person 1400 VILLAGE SQUARE BLV/ Address: TALLAHASSEE, FL 32312 City/State and Z dolomitellc@gmail.com E-mail address: (to be used for future) For further information concerning this matter, please call: BETHANY BASSETT Name of Person Area C Enclosed is a check for the following amount: S25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		04			
		TALLAHASSEE, F	L 32312 City/State and Zip Code		
		dolomitellc@gmail E-mail address: (.COM to be used for future annual report	notification)	
For fu	rther information co	ncerning this matter, please ca	all:		
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Enclos	ed is a check for the	<u> </u>			
□ \$ 2	25.00 Filing Fee	\$30.00 Filing Fee &	Certified Copy	Certificate of S Certified Copy	Status &
	Registration S	ection	Registration	Section	
	P.O. Box 632	7	The Centre of	of Tallahassee	
	Tallahassee, F	L 32314	2415 N. Moi Tallahassee,		

from the Florida DOC along with my original cover letter attesting the payment of \$33.75 for Rling a form that was returned to me. A representative on the phone explained that the previous check could be applied to this form instead.

* NOTE: Enclosed is the letter I received

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

2022 JUN 13 PH 4: 50

DOLOMITE ENTERPRISES, 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 Liabi	ility Company	were filed on M	ARCH 10, 2011	and assigned
Florida document number _L11000029510			•	
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liabi	lity company he	<u>re</u> :	
The new name must be distinguishable and contain the words	ls "Limited Liabili	ty Company," the de	esignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable	le:			
(Principal office address MUST BE A STREET A	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered and/or the new registered office address had been been been been been been been bee	istered office a		ecords, <u>enter the nam</u>	<u> </u>
New Registered Office Address:			ida street address	
-	<u> </u>	City	, Flo rid a	Zip Code
New Registered Agent's Signature, if changing Reg	istered Agent:			·
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as register being filed to merely reflect a change in the reg company has been notified in writing of this cha	agent and agre and complete red agent as p gistered office	performance of provided for in C	my duties, and I am f Chapter 605, F.S. Or,	familiar with and if this document is

If 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
MGR	BEVERLEY BASSETT	2301 FOXBORO COURT	□Add
		KISSIMMEE, FL 34746	≣Remove
			□Change
MGR	DAVID BASSETT	2301 FOXBORO COURT	□Add
	KISSIMMEE, FL 34746	Remove	
		□Change	
	<u></u>		□ Add
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ote	tive date, if other than the date of filing:
	ord 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 filed.
ate	1 April 11 . 2022
	B. Hazar Garan H
	Signature of a member or authorized representative of a member
	BETHANY BASSETT