

L11 0000060503

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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11 JUL 15 AM 11:39

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

N. Culligan JUL 18 2011

James D. Palermo
General Counsel and Executive Vice President



July 14, 2011

VIA FEDERAL EXPRESS

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: DeChron, LLC
L11000060503

Gentlemen:

Enclosed please find for filing with your office an Amendment to the Articles of Organization of DeChron, LLC. The Amendment removes a Managing Manager from the Company.

I am also enclosing a check, in the amount of \$55.00, in payment for the required filing fee and for the return to my attention of a certified copy of the Amendment

Very truly yours,



JAMES D. PALERMO

JDP/ms
Enclosures

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: DeChron, 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:

James D. Palermo

Name of Person

DeBartolo Holdings, LLC

Firm/Company

15436 North Florida Avenue, Suite 200

Address

Tampa, FL 33613

City/State and Zip Code

jpalamo@debartoloholdings.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James D. Palermo

Name of Person

at (813)

908-8400

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

FILED
11 JUL 15 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DeChron, 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 May 23, 2011 and assigned
Florida document number L11000060503.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

, Florida

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 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 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>
MGRM	Chad Chronister	5138 W. Longfellow Tampa, FL 33629	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 JUL 15 AM 11:39

FILED

Dated July 14, 2011

Signature of a member or authorized representative of a member

James D. Palermo

Typed or printed name of signee