

L11000119025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dash Real Estate 1 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 Anslander

Name of Person

Dash Real Estate 1 LLC

Firm/Company

2338 Indian Key Dr

Address

Holiday, FL 34691

City/State and Zip Code

dsa590@yahoo.com

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

For further information concerning this matter, please call:

David Anslander

727 272-0180
at (_____) _____

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**

Dash Real Estate 1 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 10/15/2011 and assigned
Florida document number L11000119025.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2338 Indian Key Drive

Holiday, FL 34691

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2338 Indian Key Drive

Holiday, FL 34691

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:

Aldo Beluzzi

New Registered Office Address:

2338 Indian Key Drive

Enter Florida street address

Holiday

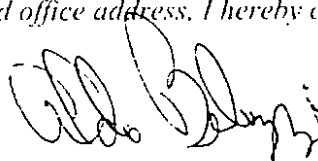
City

Florida 34691

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.



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>	<u>Address</u>	<u>Type of Action</u>
AR	David Anslander	2338 Indian Key Drive	<input checked="" type="checkbox"/> Add
		Holiday, Fl 34691	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Marguerite Anslander	2338 Indian Key Drive	<input checked="" type="checkbox"/> Add
		Holiday, Fl. 34691	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Samuel Heller		<input type="checkbox"/> Add
		200 Central Ave, Suite 2000	<input checked="" type="checkbox"/> Remove
		St Petersburg, Fl. 33701	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

18 JUL -E AM 22:45

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated 6-12-2018

David B. Smith

Signature of a member or authorized representative of a member

DAVID BUDNICKER

Filing Fee: \$25.00