120004742

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD
JUN 2 8 2012
EXAMINER



100236599711

06/25/12--01011--008 **25.00

PUN25 AM 7:21

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DRT Global, 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:
Alejandrina Diaz
DRT Global, LLC Firm/Company
9211 Sunset Drive, Suite 104 Address
City/Slate and Zip Code Acor ac diaz pa & bell south. Not E-mail address: (to be used for future separal report notification)
Remail address: (to be used for future senting treatment motification)
For further information concerning this matter, please call:
Alejandring Digz at 305, 279-3231 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$\ \text{Certificate of Status}\$\$ \$\ \text{Certified Copy} \ \ \text{(additional copy is enclosed)}\$\$ \$\ \text{Certified Copy} \ \ \text{(additional copy is enclosed)}\$\$ \$\ \text{Certified Copy} \ \ \text{(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

n
4
0'
<u>v</u>
•

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.

Page 1 of 2

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 Title Title **Address** Type of Action <u>Name</u> Michael Digz, Jr Alejandrina Digz 9211 Sunset Orlve, Sulte 104 XAdd Mipson, FC 33173 Remove MGR ☐ Add ☐ Remove Remove \square Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Michael i'A Z Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00