

L12000126000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700249820537

07/22/13--01029--023 \*\*25.00

FILED

2013 JUL 22 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 23 2013

J. BRYAN

TO: Registration Section  
Division of Corporations

SUBJECT:

DNL Inspections, 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:

Dominic Ingani  
Name of Person

DNL Inspections, LLC  
Firm/Company

433 Atwater St.  
Address

Port Charlotte FL 33954  
City/State and Zip Code

dnlinspectionsllc@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominic Ingani at (941) 661-1501  
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

FILED  
2013 JUL 22 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION  
OF

DNL Inspections 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 10/03/2012 and assigned  
Florida document number L 12000126000

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)

150 Norman St  
Port Charlotte, FL 33954

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3821 B Tamiami Trail  
# 116  
Port Charlotte, FL 33952

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

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LeAnn Preston	433 Atwater St. Port Charlotte, FL 33954	<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

FILED  
2013 JUL 22 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated

July 12, 2013.

*Dominic Ingari*

Signature of a member or authorized representative of a member

Dominic Ingari

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
2013 JUL 22 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA