L130000 25377

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JUN 2 9 2016 S. YOUNG

COVER LETTER

	LDINGS, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	VALERIE POSSENTI, P.	Α.	
		Name of Person	
	WEISBURD, EISEN & P	OSSENTI, P.A.	16 JUH 28 PH 2: 33
		Firm/Company	
	2751 EXECUTIVE PARK	C DRIVE, SUITE 104	28
		Address	PH 22
	WESTON, FLORIDA 333	331	<u>r.</u> ;
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
VALERIE POSSENTI		954 473-0500	
Name c	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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)
MAII	ING ADDRESS:	STREET/COURIE	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DRPR HOLDINGS, 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 2/18/2013 and assigned Florida document number $\underline{\frac{L13000025377}{}}$ 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) 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

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>	Type of Action
MGR	PITTSLEY, DONALD M.	1089 CREEKFORD DRIVE	□ Add
		WESTON, FLORIDA 33326	Remove
			■ Change
			☐ Remove
			Remove ·
		Add?	
		Remove	
		*****	Change
		Add	
		☐ Remove	
			Change
		Add	
			□ Remove
			☐ Change
		□ Add	
			□ Remove
			☐ Change

Effective date, if other than the date of filing:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on	
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The 90th day after the record is filed.	the earlier o
Dated JUNE 24 2016	
Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00