# \*L13000035995

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2014 JUN 27 PH 3: 41

K.SALY EXAMINER JUN 27 2014

### **COVER LETTER**

TO: , Registration S Division of Co			
SUBJECT: DDD Vir	ne Properties, LLC.		
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
riease return ait corresp	ondence concerning this matter	to the following.	
	Douglas Rodante		
		Name of Person	
	DDDV	ine Properties	LLC.
	P.O. Box 779		
		Address	
	Tavares, Florida 327	78	
		City/State and Zip Code	
	doug@greenflightinte	ernational.com to be used for future annual report notif	ication)
For further information	concerning this matter, please c	•	reality)
Douglas Rodante		at (727 ) 415-7253 Area Code Daytime	
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

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF OF	(GANIZA HON	J****
OF		FILEN
DDD Vine Properties, LLC.  (Name of the Limited Liability Company (A Florida Limited Liability Company was a compa		2014 JUN 27 PM 3: 42
(Name of the Limited Liability Company	as it now appears on our re	cords: Ciff 74 2
(A r forda Emitted Etc	omey company)	TOLLAHASSEE STATE
The Articles of Organization for this Limited Liability Company w	ere filed on 3-8-2013	and assigned
lorida document number L13000035995		-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
he new name must be distinguishable and end with the words "Limited Liabili	ty 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)		
Mulling duaress WAT BE AT OST OTTICE BOAT	<del> </del>	
3. If amending the registered agent and/or registered office address here:		ords, <u>enter the name of the nev</u>
Name of New Registered Agent:	<del></del>	the state of the s
New Registered Office Address:		

#### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

it amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Darryl Wrobel	755 DOTTEREL ROAD APT 1210	
		DELRAY BEACH, FL 33444	Remove
			□ Remove
			☐ Remove
			<del></del>
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date this document is	ner than the date of filing: (optional) e specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after sfiled by the Florida Department of State)  , 2014
ective date, if oth effective date must be date this document is ted June 25,	s filed by the Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00