

L13000 093 952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

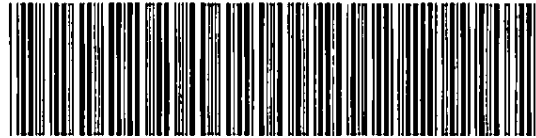
(Business Entity Name)

(Document Number)

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2019 NOV -6 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y 51111
2019 NOV 6

CHRISTINE ALEXIS GAY, P.A.

747 S. Ridgewood Ave., Suite 101
Daytona Beach, FL 32114

386-492-5935 Phone

321-373-0086 Facsimile

November 4, 2019

Department of State
Division of Corporations
Section Name
P.O. Box 6327
Tallahassee, FL 32314

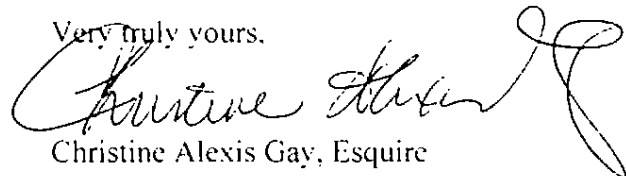
RE: Daylando, LLC
Document # L13000093952

Please find enclosed Articles of Amendment To Articles of Organization of Daylando, LLC. Also find enclosed the Resignation from Limited Liability Company, Daylando, LLC of MGRM Ralph Morford. I have enclosed a check in the amount of \$50.00. \$25.00 for the Amendment and \$25.00 for the Resignation.

Please contact me above for any questions or concerns.

With kindest regards, I remain,

Very truly yours,

A handwritten signature in cursive script, appearing to read "Christine Alexis Gay", with a large, stylized flourish at the end.

Christine Alexis Gay, Esquire

CAG/rg

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAYLANDO, LLC

Name of Limited Liability Company

The enclosed Articles of *Amended* Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Danny Gayne

Name of Person

Firm/Company

1700 Mason Avenue

Address

Daytona Beach, FL 32117

City/State and Zip Code

danny.gayne@dannyswrecker.com

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

For further information concerning this matter, please call:

Danny Gayne

386

258-7806

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**

DAYLANDO, 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 July 1, 2013 and assigned
Florida document number L13000093952.

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 "L.L.C."

Enter new principal offices address, if applicable:

1700 Mason Avenue

(Principal office address MUST BE A STREET ADDRESS)

Daytona Beach, FL 32117

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:

Danny Gayne

New Registered Office Address:

1700 Mason Avenue

Enter Florida street address

Daytona Beach

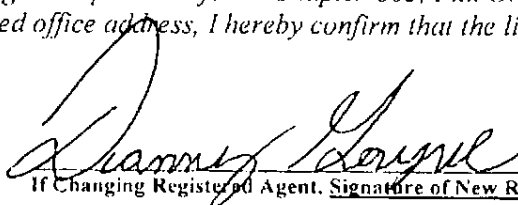
Florida 32117

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 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>
MGRM	Ralph Morford	3780 Juniper Lane	<input type="checkbox"/> Add
		Ormond Beach, FL 32174	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Danny Gayne	1700 Mason Avenue	<input checked="" type="checkbox"/> Add
		Daytona Beach, FL 32117	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 10th, 2019

Ralph Morford

Typed or printed name of signee