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## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2014

DALE ADERMAN 2016 SAYE DRIVE JACKSONVILLE, FL 32225

SUBJECT: DALE ADERMAN, LLC Ref. Number: L13000138325

We have received your document for DALE ADERMAN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 714A00010768

## **COVER LETTER**

- --- --

TO: Registration Section Division of Corporations	
SUBJECT: Dale Aderman 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:	
Dale Aderman	
Name of Person	-
Dale Aderman LLC	2
Firm/Company	
2223 County Road 220	2014 MAY 12 PH 12: 45 STUDENTARY BY STATE STUDENTARY BY STATE
Address	- SSE 12
Middleburg, FL 32068	7.0
City/State and Zip Code	
dale.aderman@hotmail.com	कृत ज
E-mail address; (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Dale Aderman904, 562-8487	
Name of Person Area Code Daytime Telephone Number	ar .
England in a short for the following emounts	
Enclosed is a check for the following amount:  \$\int_{\infty}^{\infty} \$25.00 \text{ Filing Fee}  \square \$30.00 \text{ Filing Fee} & \square \$\$55.00 \text{ Filing Fee} & \square \$\$60.00 \text{ F}\$	iling Ess
<b>½</b> \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 F	ung r.cc'

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dale Aderman, 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 10/01/2013 and assigned Florida document number L13000138325 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) 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 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 = Manager AMBR = Authorized Member			
<u>Title</u>	<u>Name</u>	Address Type of Action	
MGR	DALE ADERMAN	2223 CR 220, SUITE 205 Z Add	
		MIDDLEBURG, FL 32068	
Mgx	R927/e Sports Bar	☐ Add	
		ALL AID Add Y 12 Remove	
		55 STATE 12: 15	
		□ Add	
		Add	
		Remove	
		Add	
		Remove	

D.' If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
(The effective	date, if other than the date of filing: (optional)  we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after  is document is filed by the Florida Department of State)
Dated M	IAY 20 2014
	Tale Oderna
	Signature of a member or authorized representative of a member  DALE ADERMAN
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SEUSETARY OF SHAFE