L13000151337

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SECRETARY OF STATE.

NOV - 8 2013 T. BROWN

COVER LETTER

TO: Registration Section Division of Corporations

WARANGER 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:

Matthew Brosious

Name of Person

WARANGER LLC

Firm/Company

10706 Ruffino Ct

Address

Trinity FL 34655

City/State and Zip Code

Matt@brosious.com

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

For further information concerning this matter, please call:

Matthew Brosious

,,727 **.846-204**9

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 Fifing 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

TALLAHIASSE OF STATE

records.)

TALLAHIASSE OF STATE

records.)

WARANGER LLC

(Name of the Limited Liability Company as it now appears on our records.

(A I	Torida Emitted Erability Company)	·'/O _A
The Articles of Organization for this Limited Lial Florida document number L13000151337	bility Company were filed on 10/25/	·
rionda document number		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	the limited liability company here:	
Darby Queen Properties LLC		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
		
B. If amending the registered agent and/or	r registered office address on our r	ecords, enter the name of the nev
registered agent and/or the new registered offi		coords, enter the name of the no-
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Tari Brosious	1111 Tuscany Drive	✓ Add
		Trinity, FL 34655	Remove
President	Tari Brosious	1111 Tuscany Drive	Add
		Trinity, FL 34655	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

anici	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
6	Nov
	Signature of a member or authorized representative of a member
	MAHLEN BOSIOUS MGR Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00