13000155654

| questor's Name) | |
|-------------------|--|
| dress) | |
| dress) | |
| y/State/Zip/Phone | e #) |
| ☐ WAIT | MAIL |
| siness Entity Nar | me) |
| cument Number) | |
| _ Certificates | s of Status |
| Filing Officer: | |
| | |
| | |
| | |
| | dress) dress) y/State/Zip/Phone WAIT siness Entity Nar cument Number) Certificates |

Office Use Only



100324251741

02/08/19--01005--015 **25.55

S TALLENT APR U 2 2019



19 APR -1 PH 4: 47

March 21, 2019

GLORIA TIAN 4500 PGA BLVD SUITE 202 PALM BEACH GARDENS, FL 33418

SUBJECT: W. DAVID DEITH, LLC Ref. Number: L13000155654

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

The registered agent must sign accepting the designation.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 819A00005611

OUTAPR - L PM 1:5



February 18, 2019

GLORIA TIAN W. DAVID DIETH, LLC 4500 PGA BLVD SUITE 202 PALM BEACH GARDENS, FL 33418

SUBJECT: W. DAVID DEITH, LLC Ref. Number: L13000155654

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

THE DOCUMENT SUBMITTED CANNOT BE FILED TO MAKE CHANGES IN THE AUTHORIZED PERSON DETAIL OF THE LIMITED LIABILITY COMPANY. ENCLOSED IS THE CORRECT FORM FOR MAKING THESE CHANGES.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 119A00003458

Susan Tallent Regulatory Specialist II

019 MAR 18 PM 2:28

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|--|---|
| SUBJECT: W. DAVID Name of Limite | DETTH LLC | <u>. </u> |
| The enclosed Articles of Amendment and fee(s) are subm | sitted for filing. | |
| Please return all correspondence concerning this matter to | the following: | |
| GLOR | Name of Person | · |
| | Firm/Company | |
| 4500 | PADLUD Address | WITE 202 |
| Flog, F | City/State and Zip Code | <u>C</u> |
| E-mail address: (to | be used for future annual report notificati | EDTY, CO |
| For further information concerning this matter, please cal | l: | |
| Name of Person | at (DO) 23. Area Code Daytime Tel | 3011 ephone Number |
| Enclosed is a check for the following amount: | | |
| S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| TB10 2/4/18 | | |
| MAILING ADDDESS. | STUFFT/COUDIFD | ADDDECC. |

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

DocuSign Envelope ID: 103E1DB4-CEAC-4057-9282-53A48667D584 ANTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

| (Name of the Limited Liability (A Florida | ty Company as it now appears on our records.) a Limited Liability Company) |
|--|--|
| The Articles of Organization for this Limited Liability C | Company were filed on 11/05/2013 and assigned |
| Florida document number 13000 1554 | 254 |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limi | ited liability company here: |
| The new name must be distinguishable and contain the words "Limitation of the contain the words "Limitation of the contain the words "Limitation". | ited Liability Company," the designation "LLC" or the abbreviation. Th. L.C." |
| Enter new principal offices address, if applicable: | |
| (Principal office address MUST BE A STREET ADDR | VESS) |
| <u>-</u> | |
| Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| B. If amending the registered agent and/or registered agent and/or the new registered office add | tered office address on our records, enter the name of the new ress here: |
| Name of New Registered Agent: | PERT TURA |
| New Registered Office Address: | CO PURBUD PBG, FL 33418 Enter Florida street address |
| | , Florida |
| New Registered Agent's Signature if changing Degistered | City Zip Code |
| provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag | and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and gent as provided for in Chapter 605, F.S. Or, if this document is ad office address. I hereby confirm that the limited liability |
| | Robert Yuran 3/26/2019 II 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 Title Address Type of Action Name WDAVID DETTY MGR ROBEIZT YUZA ☐ Change □ Remove _□ Change □ Add .□ Remove _□ Change □ Add _□ Remove _ 🗆 Change □ Add □ Remove ☐ Change

| | • |
|---|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | · |
| | |
| F Fffor | tive date, if other than the date of filing: (optional) ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as |
| (If an e <u>Note</u> docur If the re | nent's effective date on the Department of State's records. Ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed. |
| (If an e <u>Note</u> docur If the re | ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed. Solvet Yuran B149C221B3F748C |
| (If an e <u>Note</u> docur If the re (b) Th | ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed. Solve Warn 12:01 a.m. on the earlier of e 90th day after the record is filed. Solve Warn 3/26/2019 |
| (If an e <u>Note</u> docur If the re (b) Th | ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed. Solvet Yuran B149C221B3F748C |
| (If an e <u>Note</u> documents If the re (b) Th | ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed. Signature of a member or authorized representative of a member. |

Filing Fee: \$25.00