# L14000017299

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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

orations

SUBJECT:

# DYNAMIC FUNDRAISING CONCEPTS, 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:

## Mitchell J Schultz

Name of Person

# Dynamic Fundraising Concepts, LLC

Firm/Company

6319 Sandcastle Court

Address

Boynton Beach, Fl 33437

City/State and Zip Code

mjsvista@aol.com

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

For further information concerning this matter, please call:

# Mitchell J Schultz

ູ, 561 , 685-7523

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

Dynamic Fundraising Con				
(Name of the Limit	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited L Florida document number L14000013299	iability Company were filed on 1/24/2014	an	d assi	igned
This amendment is submitted to amend the foll-	owing:			
A. If amending name, enter the new name o	f the limited liability company here:			
The new name must be distinguishable and end with the	words "Limited Liability Company," the designation "LLC" or the	ne abbreviat	ion "L	.L.C."
Enter new principal offices address, if applic	eable:			
(Principal office address MUST BE A STREE	TADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and/ registered agent and/or the new registered of  Name of New Registered Agent:	or registered office address on our records, ente	er the na	me (	of the new
		215 HP	Thomas and the same of the sam	1 3
New Registered Office Address:	Enter Florida street address Florida	No. 2	<u>3</u> Z	
	City	2 Zip C	ade	A STATE OF THE PARTY OF THE PAR
New Registered Agent's Signature, if changing I	Registered Agent:	DA :	7	
provisions of all statutes relative to the propaction as reginations of my position as regi	d agent and agree to act in this capacity. I further a er and complete performance of my duties, and I an stered agent as provided for in Chapter 605, F.S. O registered office address, I hereby confirm that the change.  If Changing Registered Agent, Signature of New	n familia Pr, if this ( limited li	r with docui abilit	n and ment is y

Page 1 of 3

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address Type of Ac	<u>tion</u>
MGR	Scott M Schultz	6319 Sandcastle Court	
		Boynton Beach, Fl 33437 Remove	;
MGR	Mitchell J Schultz	6319 Sandcastle Court	
		Boynton Beach,FI 33437 Remove	;
		Add	
		Add	· ;:
	<del></del>	Add O Add O Remove	grant specification of the second sec
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Filing Fee: \$25.00

14 JUN 30 AM ID: 47