

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170003000783)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COHEN & GRIGSBY, P.C.

Account Number : 32003000042 Phone : (239)390-1912 ; (239)390-1901 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** &

opierce a cohenlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN D-SCOR INTERNATIONAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

KOV 1 5 2017

Electronic Filing Menu Corporate Filing Menu

Help

(((H170003000783)

ARTICLES OF ORGANIZATION OF

D-SCOR INTERNATIONAL, LLC		
(Name of the Limited Liability Compan- (A Florida Limited Lia	y as it now appears on our records ability Company)	
The Articles of Organization for this Limited Liability Company w Florida document number L14000013647	vere filëd on January 24, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)	بهر شدخ وسرسوده کا ۱۸۸۸ ده ده در مرسوس سر وسوس این فرست بوروا در بوروا در بوروا در بوروا در سوس در سرسوس	A
Enter new mailing address, if applicable:		<u> </u>
(Malling address MAY BE A POST OFFICE BOX)		9. 8 11
[Maning dualess MAT DE ITT GOT OT TEE 2015]		
		177
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records	Name *
registered agent and/or the new registered office address here	•	€.
Name of New Registered Agent:	₽.	£9
<u></u>		
New Registered Office Address:	Enter Fiorida street addres.	S
	rı	യർദ
	City	o rida
New Registered Agent's Signature, if changing Registered Agent:	·· ·s	
! hereby accept the appointment as registered agent and agre	e to act in this capacity. I fin	rther agree to comply with the
provisions of all statutes relative to the proper and complete)	performance of my duties, a	id i am familiar with and
accept the obligations of my position as registered agent as p	rovided for in Chapter 605, . address. Thereby confirm the	r.s. Or, if inis accument is at the limited liability

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

company has been notified in writing of this change.

(((H170003000783)))

1/2017 9:44:40 AM Pierce, Carolyn PGH-FAX-01.2.0 Page 3 ((H/70003000783))

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 = Ma AMBR = Au	nager thorized Meruber		
Title	Name	Address	Type of Action
		-	Add
			Remove
			□ Change
Addison 1991 11.1.1.1.	••••••••••••••••••••••••••••••		DAdd
			□ Remove
			☐ Change
			□ Remove
			□ Change,
			್ರಾ O Add
			C Remove
			□ Char.ge
			bbA Cl
			□ Romove
			Change
Land de la constant			O Add
			□ Remove

_ Change

PGH-FAX-01.2.0 Page 4 (([H 17000300078 3)))

business consulting and trading	ctivities.				
	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MANAGAM		
	<u></u> .			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
· · · · · · · · · · · · · · · · · · ·					
***************************************					<u></u>
	44 E 574 54 - 1 4 55 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	· · · · · · · · · · · · · · · · · · ·			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·····			
		,,-,,-: 1			
				***********	<u></u>
					<u></u>
•					7 7
	··································				9 2
	*****	, <u>, , , , , , , , , , , , , , , , , , </u>			.F.
	<u> </u>	····			
					্ৰ ক
					دي وع
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ninkaa hinkaa oo maanaa oo maa aa				Annual Control of the
ective date, if other than the da	te of filing; No	ovember 14, 20	17	(option	rai)
ective date, if other than the di effective date is listed, the date must b te: If the date inserted in this block	anecific and canno	ot he prior to date	of filing or more	oan 90 days after fil	ling.) Pursuant to 605.0207
ument's effective date on the Dep	runent of State's	a records.	acatory trans re	interierio, em c	ne viii ne ve nace a
record specifies a delayed e he 90th day after the recor	fective date, Lis filed.	but not an	effective time	e, at 12:01 a.i	m, on the earlier of
ed November 14	20)17			
	/)	2			
	CALL TO THE PROPERTY OF THE PARTY OF THE PAR	CONTROL OF THE	representative of a	member	
~					

Page 3 of 3

Filing Fee: \$25.00