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TO: Registration So Division of Cor					
SUBJECT: DCP	MAINSAIL LL	С			
SUBJECT.	Name of Lim	ited Liability Company			
	Amendment and fee(s) are sub	-			
·	JB Roth	.			
		Name of Person			
	Roth Law Fi	rm PL			
		Firm/Company		>	
	234 Canal B	Slvd., Suite 2	12	2014 FEB SEGRET ALL ÁRB	د، رخ
		Address		(元) (日) (日) (日) (日) (日) (日) (日) (日) (日) (日	
	Ponte Vedra	Beach, FL 3208	32	24 F ARY 0 &SEE	ļ". Fī
	jb@rothlawfirm.n	City/State and Zip Code		PHI2: 2	1
	E-mail address: (to be used for future annual report notifi-	cation)	Sign of	
For further information c	oncerning this matter, please co	all:			
JB Roth		₃ ,904\595-79	900		
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Certificate Cop (additional copy	Status &	

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

DCP Mainsail LLC (Name of the Limite)	d Liability Compa A Florida Limited L	ny as it now appears on ou liability Company)	r records.)		_	
The Articles of Organization for this Limited Lie Florida document number <u>L14000027437</u>	ability Company	were filed on Februa	ry 18, 2014	and	assigne	d
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liabi	ility company here:				
				 1	2	,
The new name must be distinguishable and end with the v	vords "Limited Liab	ility Company," the designa	tion "LLC" or the a	bbreviatio	n 王.L.C	••
Enter new principal offices address, if applica	ıble:	118 E. Jefferson	Street		FEB	-"[]
(Principal office address MUST BE A STREET	(ADDRESS)	Suite 300		در راها (۲۰۱۱)	⁴ 2	Ĭ
	_	Orlando, FL 3280)1	1-	-13	1.4.4
		440 F. Jaffaraan	Chr. at	所の	#i î2: 2	land of
Enter new mailing address, if applicable:		118 E. Jefferson	Street	12:1	<u> </u>	
(Mailing address MAY BE A POST OFFICE I	BOX)	Suite 300				
		Orlando, FL 3280	01			
B. If amending the registered agent and/or registered agent and/or the new registered off			records, <u>enter</u>	the nar	ne of t	he new
Name of New Registered Agent:	Geoff Dissto	on				
New Registered Office Address:	184 Twelve	Oaks Lane				
	-	Enter Florida stre	et address			
	Ponte Vedra	a Beach	. Florida 32	2082		
		City		Zip Ce	ode	

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 Title <u>Name</u> **Address Type of Action** 118 E. Jefferson Street **AMBR** Blackwood Holdings Group, LLC Suite 300 □ Remove Orlando, FL 32801 **David Popper** 931 Versailles Cir. **AMBR** □ Add Maitland, FL 32751 ☐ Add ☐ Remove □ Add □ Remove □ Add ☐ Remove

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