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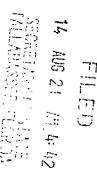
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Office Use Only



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AUG 22 2014 S. YOUNG

COVER LETTER

TO: Registration Security Division of Corp				
SUBJECT: DM	5 FUNDING I	ited Liability Company		
	Name of Lim	med Liability Company		
	Amendment and fee(s) are sub	_		
		Name of Person DING I, LLC Firm/Company	\$20 E	
	2700 N. Oce	CAN DR. APT 21	64A 5	
	SINGER IS	City/State and Zip Code	104	
	E-mail address: (ETO GMAIL, COM to be used for future annual report notif	fication)	
For further information co	oncerning this matter, please c	all:	•	
DENNIS S	EREMET	at (301) 704 Area Code Daytim	-0417	
Name of	Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for th	e following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DMS FUNDIN	GI,	LLC	
(Name of the Limited	d Liability Compa A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Lia Florida document number	bility Company	were filed on <u>5</u> <u>5</u> <u>14</u>	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	pility company here:	
The new name must be distinguishable and end with the w	ords "Limited Lial	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	2700 N. OCEAN D SINGER ISLAND, F	<u>R. APT 2104</u> A
(Principal office address MUST BE A STREET	ADDRESS)	SINGER ISLAND, F	FL 33404
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>•0x)</u>	2700 N. OCEAN D SINGER ISLAND, FL	R. APT 2104A - 33404
B. If amending the registered agent and/o registered agent and/or the new registered offi			ter the name of the new
Name of New Registered Agent:	-11.		
New Registered Office Address:	2700 1	V. OCEAN DR AP Enter Florida street address	T 2104A
		SLAND, Florida	33404 Zin 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 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Title** Name 1 Address **Type of Action** ERIC M. SEREMET REVOCABLE TRUST 4315 MORGAN PLACE AMBR ☐ Remove □ Add ☐ Remove □ Add ∓ □ Remove □ Add--' -----Remove □ Add ☐ Remove □ Add □ Remove

•		
iffective date, if other than the effective date must be specific, can the date this document is filed by the	the date of filing: cannot be prior to date of receipt or filed date and cannot be Florida Department of State)	(optional) be more than 90 days after
Dated 8/19/14		
Dem	no M Seremet	
	Signature of a member or authorized representative	e of a member
DENNIS	M. SEREMET	

Page 3 of 3

Filing Fee: \$25.00