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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: D's Legal Service, 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:

DASSCHENKA Storani  
Name of Person

Firm/Company

2311 NW 102 way  
Address

Pembroke Pines, FL 33026  
City/State and Zip Code

Dstorani@StoraniLaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DASSCHENKA Storani at 954 552-2100  
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

D's Legal Service LLC  
(Name of the Limited Liability Company or its owner or owners)

The Articles of Organization for this Limited Liability Company were filed on 7/29/14 and assigned Florida document number 114000074780

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sean Storani	231 NW 102nd Way Pembroke Pines, FL 33026	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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ALLIANCE FOR FLORIDA  
16 SEP 2011 11:24  
APR 11 2011

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

16 SEP 12 AM 1:28  
FBI MIAMI FLORIDA

16 SEP 12 AM 1:20  
16 SEP 12 00:00

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated \_\_\_\_\_.

  
Authorized representative of a member

Signature of a member or authorized representative of a member

# Dasschen's Story

Typed or printed name of signee