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## **COVER LETTER**

TO: Registration Section Division of Corporations						
Archer Lee SUBJECT:	LLC					
Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	David Worsham					
	Name of Person					
	D Dubs, LLC (Formerly Archer Lee LLC)					
	Firm/Company					
	24 Beachway Drive					
	Address					
	Palm Coast, FL 32137					
.City/State and Zip Code						
	dworsham0212@gmail.com	to be used for future annual report notifi	(cotton)			
r. f. d i.f		·	ication			
ror further information of	concerning this matter, please ca					
David Worsham		386 315-2423 at ()	: Telephone Number			
Name o	of Person	Area Code Daytime	: Telephone Number			
Enclosed is a check for t	he 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		STREET/COURING Registration Section				

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

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



October 19, 2015

DAVID WORDHAM 24 BEACHWAY DRIVE PALM COAST, FL 32137

SUBJECT: ARCHER LEE LLC Ref. Number: L14000078400

We have received your document for ARCHER LEE LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file an annual report with our office. Therefore, the document you submitted cannot be filed until the entity is reinstated on our records. The required reinstatement application, which takes the place of the annual report(s) due, must be submitted online at www.sunbiz.org. Simply click on the blue box entitled "File A Reinstatement Here!," which is located in the middle of our home page.

Once the reinstatement is submitted online, our system will allow you to choose one of three payment options. The three payment options are: 1. online by credit card; 2. online by pre-established Sunbiz E-File account; or 3. by mail with a check or money order. To pay online using a credit card, simply select the credit card option and enter your credit card information. Business entities with pre-established Sunbiz E-File accounts may choose the Sunbiz E-File account option. Entities paying by check or money order must select the check payment option, print the required payment voucher, and mail the check payment voucher with a check or money order made payable to the Florida Department of State for the total amount due.

If you choose to pay the required reinstatement fee(s) online using a credit card or Sunbiz E-File account, please contact me when the reinstatement filing has posted. If you choose to pay the required fee(s) by check or money order, please mail the check payment voucher and check or money order to my attention.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call

(850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 515A00022062

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Archer Lee LLC		
(Name of the Limited Liability ( (A Florida Li	Company as it now appears on our records.) mited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Con Florida document number L14000078400	npany were filed on May 14, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
D Dubs, LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE.	<u>SS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		55 8
		Sin Co
B. If amending the registered agent and/or register	red office address on our records, ente	r the name of the ne
registered agent and/or the new registered office addre		Fo w C
Name of New Registered Agent:		>
New Registered Office Address:		
	Enter Florida street address	
	, Florida _	
<del></del>	City	7in 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

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>	Name	Address	Type of Action
MGR	Daniel Worsham	24 Beachway Drive	□ Add
•		Palm Coast, FL 32137	<u></u> ■ Remove
			Change
CEO	Denise Worsham	24 Beachway Drive	■ Add
		Palm Coast, FL 32137	□ Remove
			Change
			1560CI 28 PL
			To Be C
			☐ Remove
			☐ Change
			Add
			Remove
			_ ☐ Change
			Add
			Remove
			П Change

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Filing Fee: \$25.00