# L14000105912

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
SEP - 5 2014		
A. LUNT		

Office Use Only



900263493749

900263493749 08/25/14--01034--010 \*\*25.00

2811 RIE 25 PH 2: 09

### **COVER LETTER**

OO VERE EEEE	
TO: Registration Section Division of Corporations	
SUBJECT: DG MINERALS 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:	
ADA DEL GALLEGO	
Name of Person	
DG MINERALS LLC	
Firm/Company	
8433 NW 68 ST	22
Address	
MIAMI FL 33166	2814 AU 25
City/State and Zip Code	E E
E-mail address: (to be used for future annual report notification)	82 E
For further information concerning this matter, please call:	<b>% 6</b>
ADA DEL GALLEGO786, 663-7911	
Name of Person Area Code Daytime Telephone Number	<del></del>
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee ■ \$30.00 Filing Fee & ■ \$55.00 Filing Fee & ■ \$60.00 Fil	ing Fee,

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certificate of Status & Certified Copy

(additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# DG MINERALS LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/03/2014 and assigned Florida document number L14000105912 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL 8433 NW 68 ST Enter new principal offices address, if applicable: **MIAMI FL 33166** (Principal office address MUST BE A STREET ADDRESS) 8433 NW 68 ST Enter new mailing address, if applicable: **MIAMI FL 33166** (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

#### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

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>:

lanager uthorized Member		
<u>Name</u>	Address	Type of Action
		□ Remove
		Remove
		D Add P P P P P P P P P P P P P P P P P P
		□ Add
		□ Remove
·		□ Add
	<u></u>	Remove
		□ Add
		□ Remove
	lanager authorized Member	lanager authorized Member

mending any other information, enter change(s) here: (Attach additional sheets, if	necessary.)	
	· · · · · · · · · · · · · · · · · · ·	
	<del></del>	
ective date, if other than the date of filing:(	optional)	
effective date must be specific cannot be prior to date of receipt or filed date and cannot be more than 90 of	lavs after	
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 od date this document is filed by the Florida Department of State)	lays after	
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of date this document is filed by the Florida Department of State)	lays after	
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 date this document is filed by the Florida Department of State)	days after	
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of date this document is filed by the Florida Department of State)  ed  O8/06/2014  Signature of a member or authorized representative of a member	lays after	(^)
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of date this document is filed by the Florida Department of State)  ed  O8/06/2014  Signature of a member or authorized representative of a member  ADA DEL GALLEGO	32 ( ·	2814
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of date this document is filed by the Florida Department of State)  ed  O8/06/2014  Signature of a member or authorized representative of a member	lays after	2814
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of date this document is filed by the Florida Department of State)  ed  O8/06/2014  Signature of a member or authorized representative of a member  ADA DEL GALLEGO	32 ( ·	2814 Fig 25
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of date this document is filed by the Florida Department of State)  ed  O8/06/2014  Signature of a member or authorized representative of a member ADA DEL GALLEGO	32 C	
effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 of date this document is filed by the Florida Department of State)  ed  O8/06/2014  Signature of a member or authorized representative of a member  ADA DEL GALLEGO	32 ( ·	2814 EJS 25 PM 2

Page 3 of 3

Filing Fee: \$25.00