

L14600159757

(Requestor's Name)

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(City/State/Zip/Phone #)

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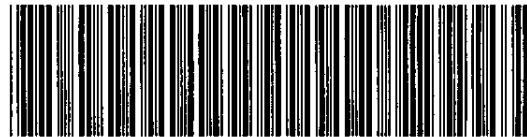
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



A LIMITED LIABILITY PARTNERSHIP

1883 W. Royal Hunte Dr.
Suite 200
Cedar City, Utah 84720
Phone 435-586-9366
Fax 435-586-9491

Susan Kumpe, Paralegal
susan@kkoslawyers.com

November 18, 2014

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Amendment for **DKW Florida Properties, LLC**. Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours,

KYLER KOHLER OSTERMILLER & SORESEN, LLP

Susan Kumpe, Paralegal

Enclosure

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DKW Florida Properties, Limited Liability Company

(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 10/06/2014 and assigned
Florida document number L14000159357

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DKW Florida Properties, LLC

The new name must be distinguishable and end with 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 348

Bountiful, UT 84011

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:

Enter Florida street address

City

Florida

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

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ALLAHASSEE, FLORIDA

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Dennis E. Wood Family	PO Box 348	☐ Add
	Trust U/A 1/16/1991,		
	Dennis E. Wood, ttee	Bountiful, Utah 84011	☒ Remove
AMBR	Dennis E. Wood Family	PO Box 348	☐ Add
	Trust U/A 1/16/1991,		
	Karin P. Wood, ttee	Bountiful, Utah 84011	☒ Remove
AMBR	Dennis E. Wood Family	PO Box 348	☒ Add
	Trust U/A 1/16/1991,		
	Dennis E. Wood & Karin	Bountiful, Utah 84011	☐ Remove
	P. Wood, trustees		
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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