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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2018

SIBELE MACKMILLAN 179 MENDOZA CIRCLE DAYTONA BEACH, FL 32126

SUBJECT: DFR BUSINESS, LLC Ref. Number: L14000176556

We have received your document for DFR BUSINESS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

To change the registered agent information you must list the registered agent information in section B of the amendment application.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Tammi Cline Regulatory Specialist III 26년 최10 23 PK 나 03

Letter Number: 318A00016724

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: DFR	BUSINESS L	ited Liability Company		
	Name of Lin	med Clabinty Company		
	Amendment and fee(s) are sub	_		
	Sibele MAC	Name of Person		
	DFR BUSINES	S LLC Firm/Company		
	179 HENDOZA	CIRCLE Address		
	DAYTONA 13	City/State and Zip Code		.
		to be used for future annual rep		
For further information co	oncerning this matter, please co	all:		
SiBELE MA	ACKMIJIAN Person	at (407)	2536440 Daytime Telephone Number	•
Enclosed is a check for th	e following amount:			
□ \$25.00 Filing Fee	ET\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified (e of Status &
MAILI	NG ADDRESS:	STREET/C	OURIER ADDRESS:	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DFR BUSINES	s LLC	· · · · · · · · · · · · · · · · · · ·		
(<u>Name of the Limite</u> (<u>d Liability Compa</u> A Florida Limited I	ny as it now appears on or liability Company)	<u>ır recordş.</u>)	
The Articles of Organization for this Limited Lia Florida document number <u>L44006476S</u> This amendment is submitted to amend the followards. If amending name, enter the new name of	S6 wing:		3 12014	and assigned
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designat	ion "LLC" or the at	obreviation "L.L.C."
Enter new principal offices address, if applica	179 HENDO	ZACIR	5.7 4.15	
(Principal office address MUST BE A STREET	ADDRESS)	DAY TONA	BEACH F	L 3 21 24
			·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	! <u>0X</u>)	DAYTONA,	ZA CIR, BEACH, F	FL 32125
B. If amending the registered agent and/o registered agent and/or the new registered off			records, <u>enter</u>	the name of the new
Name of New Registered Agent:	DEIVID F	URTAIN RAMI	RES	
New Registered Office Address:	179 MEN	UDOZA CIRCLE Enter Floridu stre	 	•
	DAY TOU	A BEACH	, Florida	32124
	7	City		Zip 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
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Filing Fee: \$25.00