L15000015064

(Requ	estor's Name)	
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Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	





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J. HARRIS

COVER LETTER

	istration Se ision of Cor			
SUBJECT:	DRChopela	s Construction, LLC		
		Name of Lim	ted Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
lease retum	all correspon	ndence concerning this matter	to the following:	
		Dama Chopelas		
			Name of Person	
		DRChopelas Construction,	LLC	
			Firm/Company	
		2074 Hwy 90		
			Address	
		Chipley, FL 32428		
			City/State and Zip Code	
		dr.chopelas@gmail.com		
			to be used for future annual report notif	ication)
For further in	iformation co	oncerning this matter, please ca	वी:	
Dama Chopo	elas		850 326-8831	
	Name of	Person Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
\$25.00 F	iling 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 enclose

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 3, 2015

DAMA CHOPELAS 2074 HWY 90 CHIPLEY, FL 32428

SUBJECT: DRCHOPELAS CONSTRUCTION LLC

Ref. Number: L15000015066

We have received your document for DRCHOPELAS CONSTRUCTION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please include the name of the MGR you are adding.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 615A00011632

STORY LAW OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DRChopelas Construction, LLC			
(Name of the Limit	ted Liability Company as it r (A Florida Limited Liability)	now appears on our records.) Company)	
The Articles of Organization for this Limited L	iability Company were fi	led on <u>5/27/2015</u>	and assigned
Florida document number L15000015066	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability cor	mpany here:	
The new name must be distinguishable and contain the v	vords "Limited Liability Comp	pany," the designation "LLC" or t	·
Enter new principal offices address, if applic	able:		<u> </u>
Principal office address MUST BE A STREE	ET ADDRESS)		
			225 二 正
Enter new mailing address, if applicable:			6 5 6
Mailing address MAY BE A POST OFFICE	BOX)		€ 5
			•
B. If amending the registered agent and registered agent and/or the new registered or	ffice address here:		
Name of New Registered Agent:	Michael	DeWAyne	Kichardso
New Registered Office Address:			
		Enter Florida street address	
		, Florida	a Zip Code
	City	V	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

Title	<u>Name</u>	Address	Type of Action
MGR	Michael Drunge	2074 Hwy 90 Chipley, Fl 32428	⊠ Add
	Ki	chaidson	☐ Remove
			☐ Change
			Add
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		05/27/2015			
		p:	e of filing or more than 9	(optional) 0 days after filing.) Purs	suant to 605.020°
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Filing Fee: \$25.00