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COVER LETTER

TO:	Registration Se Division of Cor		*	
cupu	DG RJD LI	LC		
SUBJI	вст:	Name of Lim	nited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Pleåse	return all correspo	ondence concerning this matter	to the following:	
		William R. Heitz, Esq.		
			Name of Person	
		Heitz Law Firm		
			Firm/Company	
		120 Linden Oaks Drive, S	uite 200	
			Address	
		Rochester, NY 14625		
		wheitz@heitzlaw.us	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	Tication)
For fu	rther information c	oncerning this matter, please c	all:	The state of the state of
Willia	m R. Heitz, Esq.		585 387-0000 at ()	<u> </u>
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclos	sed is a check for the	he following amount:		
\$2	5.00 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 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DG RJD LLC	
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited Liability Company were filed or	n 06/17/2015 and assigned
Florida document number L15000105333	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compan	y here:
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 ADDRESS)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	2
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	
Name of New Registered Agent	<u> </u>
New Registered Office Address:	
Enter	Florida street address
	, Florida
City	Zıp 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>	<u>Name</u>	Address	Type of Action
AMBR	· Richard J. DiMarco	4301 North Ocean Blvd.	Add
-		Apt. 505A	Remove
		Boca Raton, FL 33431	☐ Change
AMBR	NATIONAL SAFE HARBOR EXCHANGES, INC.	60 E. Rio Salado Pkwy.	_ = Add
		Suite 1103	☐ Remove
		Tempe, AZ 85281	Change
11. The state of t			
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Lelle	Signature of a member or author		·	द्धाः <u>८१ </u>

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Filing Fee: \$25.00