## L150 66 169169

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SEP 22 2015 J SHIVERS

## **COVER LETTER**

	Registration Sec Division of Corp			
CUD IE		on Company, LLC		
SUBJEC	-1:	Name of Lim	ited Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspoi	ndence concerning this matter	to the following:	
		Trevor Eldredge		
			Name of Person	
		Law Office of Trevor B. E	ldredge, LLC	
			Firm/Company	
		PO Box 768		
		4	Address	
		Kaysville, Utah 84037		
			City/State and Zip Code	
		trevor@eldredgelaw.com		
For furth	ner information co	E-mail address: ( oncerning this matter, please ca	to be used for future annual report notifica all:	ation)
Trevor I	Eldredge		801 296-2423 at ( )	
	Name of	Person	Area Code Daytime T	Celephone Number
Enclosed	d is a check for th	e following amount:		
\$25.	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

David Yukon Company, LLC		
( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number 300274263913		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company 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)		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address , <b>Florid</b> a	P21 AM
·	City	C Zip Code
New Registered Agent's Signature, if changing Registered Agent:		5.

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
MGR	David Kong	6574 N. State Rd. 7, #402	
		Coconut Creek, Florida 33073	≅ Remove
			☐ Change
MGR	Tat Yee Kong	6574 N. State Rd. 7, #402	Add
		Coconut Creek, Florida 33073	□ Remove
			☐ Change
			☐ Remove
			Change
			Add
			□ Remove
			Change
			□ Add
			Remove
			□ Change
		<u></u>	□ Add
			☐ Remove
			☐ Change

Effective date, if other than the date of filing:    Coptional	If amending any other information, enter change(s) here: (Attac	
Effective date, if other than the date of filing:		
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Effective date, if other than the date of filing:  (optional)  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed.  Dated  September 15  2015  Signature of a member or authorized representative of a member		
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Dated September 15 , 2015  Signature of a member or authorized representative of a member	If an effective date is listed, the date must be specific and cannot be prior to date of <b>Note:</b> If the date inserted in this block does not meet the applicable statu	(optional) filing or more than 90 days after filing.) Pursuant to 605.020
Signature of a member or authorized representative of a member		fective time, at $12{:}01$ a.m. on the earlier $\alpha$
	Dated September 15 , 2015 .	
Don Rosenthal	Signature of a member or authorized rep	resentative of a member
	Don Rosenthal	

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Filing Fee: \$25.00