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SECRETARY OF STATE
MILLAHASSEE, FLORIDA
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APR 1 8 2017 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DDT Quality Services "LLC" Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dewane Smith
DDT Quality ServiceS/LC
2167 Mallard Rd
Middle burg Fl 32008
Smith de Waner a Yahoo. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
For further information concerning this matter, please call:
Dewane Smith at (904) 480-1027 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Sta

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

Quality Services "LLC"

(A Florida Lin	nited Liability Company)
The Articles of Organization for this Limited Liability Com- Florida document number	pany were filed on and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and contain the words "Limited Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES)	Liability Company," the designation "LLC" or the abbreviation "LLC" 2/6.7 Mallard Rd 32068
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2167 Mallard Rd Middle burg Fla 32068
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, enter the name of the new shere:
New Registered Office Address: 216	vane Smith 7 Mallard Rd Enter Florida street address
M	iddleburg, Florida 37068 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 or removed:	Authorized Person(s) authorized to ma from our records:	mage, enter the title, name, and address of each	person being added
MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
	Donald G. Miller	1325 Fruit Cove Rd. Jocksonville Fl 32269	√ □ Add
		Jacksonville Fl 32269	Remove
			Change
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l an elt Note:	ive date, if other than the date of filing: March 3 = 2017 (optional) ective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the series effective date on the Department of State's records.
The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Wewere Smith Signature of a member or authorized representative of a member Dewane Smith

Page 3 of 3

Filing Fee: \$25.00