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ALLAHASSEE FLOSIEK

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: The DOUST 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:	
Sarah White	
The IDU LIST LLC Firm/Company	
3158 Laurel Drive	
Gulf Breeze, Florida 32563  City/State and Zip Code  Saran @ myidulist. Lown  E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Sarah White at (950) U19 - 0700 Proposition of Person at (950) U19 - 0700 Proposition of U19	2015 NOV 12
(additional copy is enclosed) Certified	& TU GE Feer

**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

## TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Compar A Florida Limited L	ny as it now appears on our records.) iability Company)	)	
The Articles of Organization for this Limited Lia Florida document number <u>L15000134</u>	bility Company 3	were filed on August 1	0,2015 <sub>and</sub>	assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabili	ty Company," the designation "LLC" (	or the abbreviation	ı"L.L.C."
Enter new principal offices address, if applica	ble:		···-	
(Principal office address MUST BE A STREET	`ADDRESS)		· · · · · · · · · · · · · · · · · · ·	····
				<del></del>
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	OX)			
B. If amending the registered agent and/o registered agent and/or the new registered off  Name of New Registered Agent:  New Registered Office Address:	ice address here	: White	2015 NOV 12 SECKETARY O TALLAHASSEE	ne of the new
		Enter Florida street address	F ST	
		, Flor	ida Signa Zigra	ode
		ř		

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.

Changing Registered Agent, Signature of New Registered Agent

## or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR AMBR	Sarah Ennis	3158 Laurel Drive	
AMBR		Gulf Breeze FL 3250	Remove
			🗀 Change
MGR AMBR	Sarah White	3158 Laure Drive Gulf Breeze, Fe 325	Add
ANNOC		Gulf Breeze fa 325	<u>63</u> □ Remove
			Change
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C. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day  Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	(optional) s after filing.) Pursuant to 605.0207 (3)(b ts, this date will not be listed as the
the record specifies a delayed effective date, but not an effective time, at 12: b) The 90th day after the record is filed.	:01 a.m. on the earlier of:
Dated November 9, 2015.	
Dated November 9, 2015.  Signature of a member or authorized representative of a member	
Sarah Ennis White	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00