# L15000162542

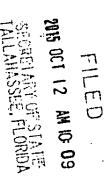
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	1
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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# COVER LETTER \*

	Division of Cor			J
SUBJEC	De	al Land Surveying, LLC		
Debale		Name of Lim	ited Liability Company	<del></del>
The enclo	osed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Cheryl Deal		
			Name of Person	<del></del>
		Deal Land Survey	ring, LLC	
			Firm/Company	
		5830 Great Egret D	Or.	
			Address	
		Sanford, FL 32773		
			City/State and Zip Code	<del></del>
		Cheryl@DealLandSu	• •	
			to be used for future annual report noti	fication)
For further	er information co	oncerning this matter, please ca	all:	
	Cheryl Deal		407 330-5813	
	Name of	f Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 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

FILED

2015 OCT 12 AM 10: 09

Deal Land Surveying, LLC

SECRETARY OF STATE TALLAHASSEE, PLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

		and assigned
Florida document number L15000162542		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company	<u>/ here</u> :	
The new name must be distinguishable and contain the words "Limited Liability Company," the	ne designation "LLC" or the ab	breviation "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 address on our records, enter the name of the		
	on our records, enter	the name of the new
registered agent and/or the new registered office address here:		
Name of New Registered Agent:		· · · <del>- · ·</del>
New Registered Office Address:		
Enter .	Florida street address	
	, Florida	Zip Code
City New Registered Agent's Signature, if changing Registered Agent:		zip Соас

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

MGR = M AMBR = A	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address 1497 Main St. # 321	Type of Action
MGR ———	Bill H. Hyatt, Jr	Dunedin, FL 34698-4612	<b>=</b> Add
			Remove
			Change
			Add
			☐ Remove
		-12	Change
			□ Add
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fective date, if other than the date of filing:	suant to 605.0207 ( not be listed as th
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t The 90th day after the record is filed.	he earlier of:
ted October 7, 2015.	
Cheryl S. Deal	

Page 3 of 3

Filing Fee: \$25.00