## 16 0000 80710

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
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## **COVER LETTER**

Tallahassee, FL 32314

	egistration So vision of Cor				
CLID IDZVI	DK EASY	I.LC			
SUBJECT	<u> </u>	Name of Lim	nited Liability Company		
The enclose	ed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
		ondence concerning this matter	-		
		KARI KARAGIS			
			Name of Person	_	
		DK EASY LLC			
		<del></del>	Firm/Company	_	
		3863 NW 124TH AVE			
		<del></del> -	Address	<del>-</del>	
		CORAL SPRINGS FL 330	065		
			City/State and Zip Code	_	
		DKEASYLLC@GMAIL.C			
C C .1			to be used for future annual report notification)		
For further	information c	oncerning this matter, please c	all:	201 S1	
KARI KAR	RAGIS		305 896-3871 at ( )	20 Ja	-
-	Name o	of Person	Area Code Daytime Telephone Numb	2020 JUN 24 SECRÉTAN ALL ANACS	
Enclosed is	a check for th	he following amount:		E PR	
□ \$25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy is enclosed) Certified Copy is enclosed)	Filing Fee. Create of Status & ed Copy (all copy is enclosed)	ر_;
Re	ailing Addres egistration Sivision of C	ss: Section Corporations	Street Address: Registration Section Division of Corporations		
P.	O. Box 632	27	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DK EASY LLC		
(Name of the Limited Liability Comp. (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.16000080710}{1.16000080710}$ .	were filed on 04/25/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	3863 NW 124TH AVENUE	
(Principal office address MUST BE A STREET ADDRESS)	CORAL SPRINGS, FLORIDA 33065	
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:		<b>2020</b>
New Registered Office Address:		<u> </u>
	Enter Florida street address Florida	
	, Florida City	Zip Codes
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 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
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Filing Fee: \$25.00