

# L16000139814

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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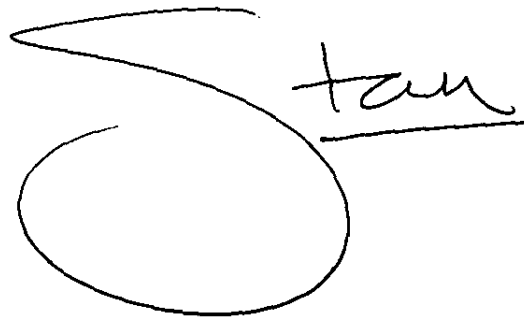
FILED  
SEP 29 2016  
TALLAHASSEE, FLORIDA

FILED  
SEP 29 2016  
TALLAHASSEE, FLORIDA

D. BRUCE  
SEP 30 2016

Deborah,

Thanks for all of your  
help and guidance with this.  
Please call me @ 904/614-2001  
if I made a mistake with the  
enclosed forms.

Stan

FILED

2015 SEP 29 P 3:20

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2016 SEP 29 PM 4:08

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

September 19, 2016

BRENNA GARRIS HAITHCOCK  
P.O. BOX 1007  
PONTE VEDRA BEACH, FL 32004

SUBJECT: DCP CLOTHING L.L.C.  
Ref. Number: L16000139814

We have received your document for DCP CLOTHING L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 716A00020040

2016 SEP 29 P 3:20  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

D C P Clothing LLC

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

The Articles of Organization for this Limited Liability Company were filed on 07/20/2016 and assigned  
Florida document number L16000139814

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 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 address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida  
City

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Stan Garrison Haightcock	520 Honey Locust Lane Ponte Vedra Beach, FL 32082	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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FILED  
2018 SEP 20 PM 4:00  
PONTA VEDRA BEACH, FLORIDA

2115 SEP 29 PM 3:20  
FBI  
FALLASSEE 10604

SEP 29 2 3:20 PM '64  
FBI  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D.C.  
20535

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated September 26, 2016.

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Brenna Garriss Haithecock  
Typed or printed name of signer

Typed or printed name of signee