11600) 157669

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
	usiness Entity Nar	ne)
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	ocument Number)	
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Certified Copies	Certificates	s of Status
		
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

	Registration Se Division of Cor					
SUBJEC	Home insp	ection by DGP LLC				
SUBJEC	·	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub	-			
rease rec	um an correspo	David G Parker	to the following.			
			Name of Person			
		Home Inspection by DG	P LLC			
			Firm/Company			
	29311 Birds Eye Drive					
			Address		A 8	
		Wesley Chapel, Florida	33543		AUG	
		dparkerman10@aol.com	City/State and Zip Code			ILED
			to be used for future annual report notifical	tion)	N PM 3: 59	
Por furthe David G		oncerning this matter, please ca	727 698-1060		59 DA	
	Name of	f Person	at () Area Code Daytime Te	elephone 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)	Certified C	of Status &	

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

Home Inspection BY DGP, LLC	,		
(Name of the Lim	ited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)	
The Articles of Organization for this Limited In Florida document number L16000157669	Liability Company were filed o	n August 23, 2016	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability compar	ny here:	
The new name must be distinguishable and contain the Enter new principal offices address, if appli		the designation "LLC" or the abb	reviation "L.L.C."
• • • • • • • • • • • • • • • • • • • •			
(Principal office address MUST BE A STRE	<u>CI ADDRESS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	: BOX)		TALLAHASS
B. If amending the registered agent and registered agent and/or the new registered of	• • • • • • • • • • • • • • • • • • • •	s on our records, enter t	high 30 the ne
Name of New Registered Agent:	David G Parker		
New Registered Office Address:	29311 Birds Eye Drive		
	Ente	r Florida street address	
	Wesley Chapel	, Florida <u>335</u>	43
	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			□ Change
		-	□ Add
			☐ Remove
			Change
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an effec i ote: If	7/30/2018 date, if other than the date of filing:	.) Pursuant	to 605.0 oe listed	3207 d as
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. Oth day after the record is filed.	on the	earliei	r of
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The 9	7/30 .18			

Page 3 of 3

Filing Fee: \$25.00