# 116000172180

Office Use Only



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2016 SEP 23 P 5: 33

D. BRUCE SEP 28 2016



September 20, 2016

CRYSTAL M MOORE 6944 NW 26TH ST MARGARATE, FL 33063

SUBJECT: DOMINION REALTY GROUP, LLC

Ref. Number: L16000172180

We have received your document for DOMINION REALTY GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

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: 716A00020136=

2018 SEP 23 P 5: 3

### **COVER LETTER**

| SUBJECT:                   | DOMINION      | REALTY GROUP, LLC                            |   |  |               |          |  |
|----------------------------|---------------|--|---|--|---------------|----------|--|
| SOBJECT,                   |               | Name of Lim                                  | ited Liability Company  |  |               |          |  |
| The enclosed               | Articles of A | amendment and fee(s) are sub                 | mitted for filing.  |  |               |          |  |
| Please return              | all correspon | dence concerning this matter                 | to the following:   |  |               |          |  |
| CRYSTAL M MOORE            |               |  |   |  | 25 6 C        |          |  |
|                            |               |  | Name of Person  |  | P.            |          |  |
| DOMINION REALTY GROUP, LLC |               |  |   |  | ن<br>::       |          |  |
| Firm/Company               |               |  |   |  | .5            | <u>.</u> |  |
| 6944 NW 26TH ST            |               |  |   |  | ហ             |          |  |
|                            |               |  | Address   |  |               |          |  |
|                            |               | MARGATE, FL 33063                            |   |  |               |          |  |
|                            |               |  | City/State and Zip Code   |  |               |          |  |
|                            |               | CRYSTAL.REDHEAD@Y                            |   |  | 2016          |          |  |
|                            |               | E-mail address: (1                           | to be used for future annual report notific                         | ation)   | <u>چ</u>      | 7        |  |
| For further in             | formation co  | ncerning this matter, please ca              | all:  |  | SEP 2         | e        |  |
| CRYSTAL                    | M MOORE       |  | 954 288-3393<br>at ( )  | 2.5 And 1.5 An | 22<br>        |          |  |
|                            | Name of       | Person                                       |   | Celephone Number   | . α<br>α<br>α |          |  |
| Enclosed is a              | check for the | following amount:                            |   | ₹7.  |               |          |  |
| □ \$25.00 F                | iling Fee     | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filir Certificate Certified C (additional co   | of Status     |          |  |

**MAILING ADDRESS:** 

Registration Section Division of Corporations

TO:

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**

| bility Company<br>orida Limited Lia | y as it now appears on our record<br>ability Company)   | <u>s.</u> )   |  |
|-------------------------------------|---|---|--|
| y Company v                         | vere filed on 9/14/2016   | and assigned  |  |
|                                     |   |   |  |
| ;:                                  |   |   |  |
| imited liabil                       | ity company here:   |   |  |
| Limited Liabilit                    | y Company," the designation "LLC  | " or the abbreviation "L.L.C."  |  |
|                                     | 1250 South Pine Island Rd., Ste 375 Plantation, FL 33324  |   |  |
| DRESS)                              |   |   |  |
| 1                                   | 670951 Coral Springs, FL 33067  |   |  |
| ddress here:                        |   |   |  |
| 6944 NW 26th St                     |   | 8 2   |  |
|                                     | Enter Florida street addres.  | s man III   |  |
| argate                              | . Flo   | orida. 33063  |  |
|                                     | City  | <del></del>   |  |
|                                     | y Company v  imited liabil  Limited Liabilit  DRESS)  gistered offi ddress here:  ystal M Moore  44 NW 26th S | Limited Liability Company," the designation "LLC 1250 South Pine Island Rd., St Plantation, FL 33324  P.O. Box 670951 Coral Springs, FL 3304  gistered office address on our records ddress here:  ystal M Moore  44 NW 26th St  Enter Florida street address |  |

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>          | Type of Action   |
|--------------|-----------------|-------------------------|--|
| MGR          | Crystal M Moore | 6944 NW 26TH ST         | <b>■</b> Add   |
|              |                 | MARGATE, FL 33063       | ☐ Remove   |
|              |                 |                         | □ Change   |
| MGR          | Monica Haney    | 9955 Westview Dr #225   | Add  |
|              |                 | Coral Springs, FL 33076 | <b>≅</b> Remove  |
|              |                 |                         | ☐ Change   |
| MGR          | Brandon Moore   | 6944 NW 26TH ST         | □ Add  |
|              |                 | MARGATE, FL 33063       | ■ Remove   |
|              |                 | - <del></del>           | Change   |
|              |                 |                         | Add  SEP  Remove  Change  Add  Add  Add  Add  Add  Add |
|              |                 |                         | □ Remove   |
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| ective date, if other than the date of filing effective date is listed, the date must be specific as | ng:                      | of filing or more than 90 day | ( <b>optional)</b><br>/s after filing.) Pursuant to 6 | 05.020                                      |
| te: If the date inserted in this block does not ument's effective date on the Department of          | meet the applicable st   | atutory filing requirement    | ts, this date will not be li                          | sted a                                      |
| record specifies a delayed effective<br>he 90th day after the record is filed                        | date, but not an e<br>i. | effective time, at 12         | :01 a.m. on the ear                                   | lier o                                      |
| September 22   | 2016                     |                               |   |   |
|  | 7                        |                               |   |   |
|  | ***                      |                               |   |   |

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Filing Fee: \$25.00

Typed or printed name of signee