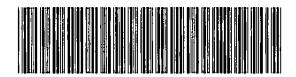
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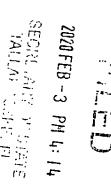
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	_

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O SIMMONS FEB 25 2020

COVER LETTER

Tallahassee, FL 32314

	gistration Sec vision of Corp				
CHD IECT.		VICES GRP LLC			
SUBJECT:		Name of Lim	ited Liability Company		-
The enclose	d Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return	n all correspo	ndence concerning this matter	to the following:	}	
		Donna Martin-Manragh			
			Name of Person	_	
		DNAB SERVICES GRP L	LC		
			Firm/Company		
		2960 58TH AVE S			
			Address		
		ST PETERSBURG, FL 33	712		
			City/State and Zip Code		
		dnabservices@gmail.com	16-6		
For further i	information co	oncerning this matter, please ca	to be used for future annual r	eport notification)	
Donna Mari	tin-Manragh		727 471	-8500	
	Name of	Person	at () Area Code	Daytime Teleph	one Number
Enclosed is	a check for th	e following amount:			
□ \$25.00		☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	a <u>iling Addres</u>		Street Ad		
	gistration S			tion Section	
	vision of Co O. Box 632			n of Corporation of Callaha	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C (A Florida Lia	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com- Florida document number <u>L16000186574</u> .	pany were filed on 10/07/2016	and assigned
This amendment is submitted to amend the following:		MA
A. If amending name, enter the new name of the limited	-	FEB -
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	THE T
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or agent and/or the new registered office address here:	ffice address on our records, <u>enter th</u>	ne name of the new registered
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida street address	
	, Flor	ida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

DMAD CEDVICES CODE LLC

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

Title	Name	Address	Type of Action
AMBR	NASJA M. WILKINS	2960 58th Ave S., St Petersburg, Fl 33712	□Add
			■Remove
			☐ Change
AMBR	AMARI J. WILKINS	2960 58th Ave S., St Petersburg, FI 33712	□Add
			—— ₩Remove
			□Change
AMBER	DAVE B. MARTIN GORDON	2960 58th Ave S., St Petersburg, Fl 33712	□Add
		 -	≣Кетюче
			[]Change
MGR	DONNA MARTIN-MANRAGH	2960 58th Ave S., St Petersburg, Fl 33712	Add Decemove Becomove Becomove Add Decemove Decemove Add Decemove Decemo
			□Remove
			DChange
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			□Remove
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ctive date, if other than t	e date of filin	28 JAN 202	0		(optional)	
effective date is listed, the date need to the date inserted in this	ust be specific an	id cannot be prior	to date of filing o	r more than 90 day	s after filing.) I	tersuant to 605.
iment's effective date on the	Department of	State's records.	ore statutory in	mig requiremen	is, uns date w	in not oc usas
cord specifies a delayed effect	ive date, but no	t an effective tir	ne, at 12:01 a.r	n. on the earlier	of: (b) The	90th day after
filed.						
, 28 JAN		2020				
zd Ze JAIN			<u>.</u> .			
		\				

Typed or printed name of signee