L/6000215655

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	DLM SOUP	AR LLC ited Liability Company	
The enclosed Articles of A		mitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	ED WARD	Name of Person	
		LAR LL C	
	201 KE	MEMNG RD Address	
	DOLTON	P FL 33725 City/State and Zip Code	<u> </u>
	Mull A E-mail address: (t	NEED 9 VAHOO to be used for future annual report not	fication)
For further information con	ncerning this matter, please ca	ıll:	•
20 MULAN Name of I	UG Person	at (467) 403 Area Code Daytim	2 150 e Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

FILED

DLM SOLAR LL	Inv as it now appears on our records. VALLAHAGE OF
(Name of the Limited Liability Compa (A Florida Limited)	1,72,7 Cm "O', C'2"
The Articles of Organization for this Limited Liability Company Florida document number 46000215655	were filed on $11/28/2016$ and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	4210 CLUBSIBE DR LONGWOOD, FL 32779
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	DELTONA, FL 32750
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
	ED MULCANE
New Registered Office Address: 221	KETTELING LD Enter Florida street address
DELT	TONA , Florida 32725 City Zip Code

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

٠,

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 = Au	thorized Member ,		
<u>Title</u>	<u>Name</u>	Address	Type of Action
mar	JOSHUA Madanie	L 776 BEACONST	□ Add
	•	1776 BGACONST PALMBAY, FL 32907	Remove
			Change
AP/mon	KGNWETH MITCHELL	536 CLEMSON DL	
·		ALTAMONTE SPHING	Remove
a 1	•	FC 32714	Change
AD/MER	MATTHEW W SCHW	B 202 HOWYWOOD BE	Add
		WEST MECBOCANE	- R emove
		FL 32904	Change
	·	- Po	Emove
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an effective date Note: If the dat	if other than the dat is listed, the date must be e inserted in this block ective date on the Depar	specific and can does not meet	not be prior to d the applicable	ate of filing or m	ore than 90 days	p tional) after filing.) Pur this date will	suant to 605.020 not be listed a
The 90th da	ecifies a delayed ef ay after the record	is filed.		n effective t	ime, at 12:0)1 a.m. on t	the earlier o
ated	2/13 Edware Sign		2019				
	Edware	l Mu	Mar e	ed representative	of a member		
	Sigi	iature of a men	icei ci uumoine	a representante	or a monitor		

Page 3 of 3

Filing Fee: \$25.00



February 6, 2017

DLM SOLAR LLC EDWARD MULLANE 221 KETTERING RD. DELTONA, FL 32725

SUBJECT: DLM SOLAR LLC Ref. Number: L16000215655



We have received your document for DLM SOLAR LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 017A00002346