

L16000219130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

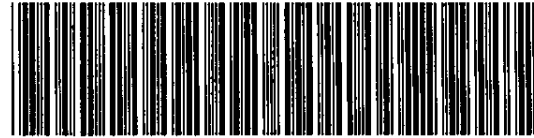
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DIGITAL NETWORK PARTNERS, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID MASSEY

Name of Person

DIGITAL NETWORK PARTNERS, LLC

Firm/Company

1200 BRICKELL BAY DR APT 2904

Address

MIAMI, FL 33131

City/State and Zip Code

DAVID@DIGITALNETWORKPARTNERS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID MASSEY

Name of Person

at ( 305 )

Area Code

209-8881

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input checked="" type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|---|

CR2E062 (9/15)

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**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: DIGITAL NETWORK PARTNERS, LLC

**SECOND:** The Florida Document number of the limited liability company is: L16000219130

**THIRD:** Document to be corrected is: ARTICLES OF ORGANIZATION FLORIDA LLC

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

ARTICLE IV REMOVE: MGR GREEN CORPS TRUST, MGR CHRIS MASSEY, MGR KYLE  
BRUMBLEY, MGR ADRIENNE BENNETT.

THERE WILL BE JUST ONE MGR FOR THE LLC. CORRECT STATEMENT AS FOLLOWS:

MGR DAVID MASSEY 1200 BRICKLELL BAY DR APT 2904 MIAMI, FL 33131

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

- ☐ The electronic transmission of the record was defective.

\_\_\_\_\_  
Signature of Authorized Representative Date

Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**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.*

David Massey  
Registered Agent's Signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)