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## **COVER LETTER**

Division of C	orporations				
Land Tru SUBJECT:	ust Agreement No. 210, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Felix G. Montanez, Esq.				
	Law Office of Felix G. M	Name of Person ontanez, P.A.			
	2202 N. West Shore Blv	Firm/Company rd, Suite 200			
		Address		SECRETARY TALLAHASS	
	rlvc3rd@gmail.com	City/State and Zip Code		<u>:"1</u>	-
For further information	E-mail address: ( n concerning this matter, please c	to be used for future annual report notiful.	lication)	- [유. 17 - 18 18 18 18 18 18 18 18 18 18 18 18 18	2 0 0
Felix G. Montanez, E	Esq.	813 816-2827 at ()			_
Namo	e of Person	Area Code Daytime	e Telephone Number		
Enclosed is a check for	r the following amount:				
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

MAILING ADDRESS:

TO: · Registration Section

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

## LAND TRUST AGREEMENT NO. 210, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(ivi killed tillimetti)	saloring Company (
The Articles of Organization for this Limited Liability Company	were filed on 01/17/2017 and assigned
Florida document number L17000013484	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
DorJean, LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	199 5. Beligher Rd. #8374
(Principal office address MUST BE A STREET ADDRESS)	Clearwater, FL 33758
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:	
New Registered Office Address:	Enter Florida strees address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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>	Address	Type of Action
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E. Effective date, if other than the	date of filing:	(optional)	
Note: If the date inserted in this b	st be specific and cannot be prior to date of lock does not meet the applicable statu	filing or more than 90 days after filing.) tory filing requirements, this date v	Pursuant to 605.020 vill not be listed as
document's effective date on the U	Department of State's records.		
If the record specifies a delaye	d affective date but not an off	ectivo timo lat 12:01 a a	n the earlier -
(b) The 90th day after the rec	cord is filed.	ecuve time, at 12.01 a.m. t	n the eather o
August 22	2018		
Dated August 22		<i>-</i>	
	b 1 // /		

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Typed or printed name of signec

Filing Fee: \$25.00