

L17000032371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

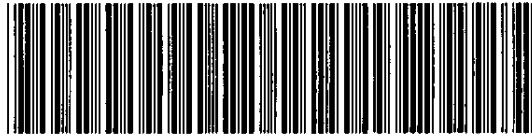
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2017 MAR -3 A 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

MAR 06 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 491759 8124512

AUTHORIZATION

COST LIMIT : \$25.00

ORDER DATE : January 31, 2017

ORDER TIME : 1:03 PM

ORDER NO. : 491759-010

CUSTOMER NO: 8124512

DOMESTIC AMENDMENT FILING

NAME: D & D SAWMILL, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT#

EXAMINER'S INITIALS: _____

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

D & D SAWMILL, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 02/14/2017 and assigned
Florida document number L17000032371.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

1582 E. Black Forrest Road

Dunnellon, FL 34434

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1582 E. Black Forrest Road

Dunnellon, FL 34434

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

DAVID N. CASSELL

New Registered Office Address:

1582 E. Black Forrest Road

Enter Florida street address

Dunnellon

City

Florida 34434

Zip Code

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 N. Cassell
If Changing Registered Agent, Signature of New Registered Agent

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2017 FEB - 2 A 8 41
CLERK OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
AMBR	David Cassell	1582 E. Black Forrest Road	<input type="checkbox"/> Add
		Dunnellon, FL 34434	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Debra Cassell	1582 E. Black Forrest Road	<input type="checkbox"/> Add
		Dunnellon, FL 34434	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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 2017 MAR 03 A 8 41
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 2/20/17, _____

David N Caswell

Signature of a member or authorized representative of a member

David Cassell

DAVID N CASSELL

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-
 10-
 1-
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