

**L17000032642**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 MAR -6 PM 1:18  
\$25.00

MAR 07 2017  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**Dove Angel LLC**

**SUBJECT:** \_\_\_\_\_  
Name of Limited Liability Company

**The enclosed Articles of Amendment and fee(s) are submitted for filing.**

**Please return all correspondence concerning this matter to the following:**

Angela Dovner

Name of Person

Firm/Company

830 Greensward Ct. H106

**Address**

Delray Beach, FL 33445

City/State and Zip Code

angeldovner@gmail.com

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

**For further information concerning this matter, please call:**

Angela Dovner 561 756-1679  
 \_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
 Name of Person Area Code Daytime 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**

Dove Angel 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 2/9/2017 and assigned  
Florida document number L17000032642

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:

830 Greensward Ct. H106, Delray Beach, FL 33445

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

830 Greensward Ct. H106, Delray Beach, FL 33445

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Angela Dovner

New Registered Office Address:

830 Greensward Ct. H106, Delray Beach, FL 33445

Enter Florida street address

Delray Beach

Florida

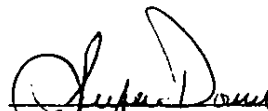
33445

City

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.*



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 = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Angela Dovner	830 Greensward Ct. H106, Delray I	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Ryan Dovner	830 Greensward Ct. H106, Delray I	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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 DIVISION OF CORPORATIONS

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

I simply want the titles to change. I didn't realize I wasn't supposed to have a President and Vice President.

I would like the titles of the two names above changed to MGR please.

I Angela Dovner accept appointment to stand as the new registered agent. I am familiar and accept the obligations of the position.

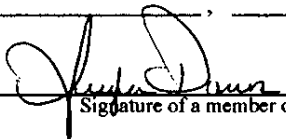
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 February 28, 2017



Signature of a member or authorized representative of a member

Angela Dovner

Typed or printed name of signee