

L17000054603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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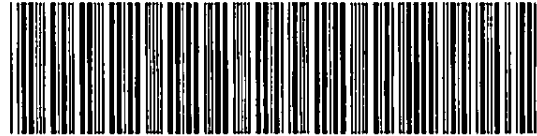
(Business Entity Name)

(Document Number)

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DIVISION OF CORP. AFFAIRS

C. SIMMONS

SEP - 7 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DFMMJ Investments, LLC

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:

Brady J. Cobb, Esquire

Name of Person

Cobb Eddy, PLLC

Firm/Company

642 N.E. 3rd Avenue

Address

Fort Lauderdale, Florida 33304

City/State and Zip Code

bcobb@cobbbeddy.com

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

For further information concerning this matter, please call:

Brady Cobb

954 527-4111
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**

DFMIMJ INVESTMENTS, LLC

(Same 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 March 9, 2017 and assigned
Florida document number L17000054603

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)

14810 N.W. 94th Avenue

Alachua, Florida 32615

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14810 N.W. 94th Avenue

Alachua, Florida 32615

**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:

New Registered Office Address:

Enter Florida street address

Florida

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

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DIVISION OF CORPORATE FILINGS

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	George Scorsis	14810 N.W. 94th Ave	<input checked="" type="checkbox"/> Add
		Alachua, Florida 32615	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Rene Gulliver	14810 N.W. 94th Ave	<input checked="" type="checkbox"/> Add
		Alachua, Florida 32615	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Susan Baumgartner	14810 N.W. 94th Ave	<input checked="" type="checkbox"/> Add
		Alachua, Florida 32615	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Brady Cobb	14810 N.W. 94th Ave	<input checked="" type="checkbox"/> Add
		Alachua, Florida 32615	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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DIVISION OF CORRECTIONS

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(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)

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 August 25 2017

Signature of a member or authorized representative of a member

Brady J. Cobb

Typed or printed name of signee