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<u></u>	_
(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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wrong form	
Office Use Only	



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O SIMMONS DEC 19 2018



December 3, 2018

VICTORIA DAVIS 119 D BEACH DR FT WALTON BEACH, FL 32547

SUBJECT: DAKO DESIGNS LLC Ref. Number: L17000131905

We have received your document for DAKO DESIGNS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

Letter Number: 718A00024739

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT:	DAKO DEAMS LLC Name of Emited Liability Co	ompany	
	endment and fee(s) are submitted for filir		
Please return all corresponde	nce concerning this matter to the following	ng:	
	Victoria Davi	(
	Name of	Person	
	Firm/Ce	mpany	
	119 D Beach to	<u>12</u>	
	Fort Walton Beach City/State an	FC 32547	
-	sales a tidwellhomes E-mail address: (to be used for h	LOM nure annual report notification)	
For further information cone	erning this matter, please call:		
Viltoria Name of Per	Son at (## Are.	50) <u> </u>	e Number
Enclosed is a check for the fe	ollowing amount:		
·	Certificate of Status Certific	rd Copy	S60.00 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

DAKO DENGN	11 46	
(<u>Name of the Limited Lia</u> Wil (A Florid	ity Company as it now appears on a Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability C Florida document number <u>L17000 3 905</u>	Company were filed on 0 6	14 2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the design	pation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
		_1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MED	Michael Kochek	100 2nd St	
		Shalimar FL 32579	Remove
			Change
MGR	Elizabeth Kocher	190 2nd 8t Shalimar FL 32579	🗆 Add
		Shalimar FL 32579	Remove
			☐ Change
			⊡-Add
			Remove
			Change
			D Add
			☐ Remove
			☐ Change
			Remove
			Change
			🗆 Add
			Remove
			☐ Change

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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be plior to date of filing or more than 90. E: If the date inserted in this block does not meet the applicable statutory filing requirem ument's effective date on the Department of State's records.	(optional) days after filing) Pursuant to 605.01 tents, this date will not be listed
record specifies a delayed effective date, but not an effective time, at the 90th day after the record is filed.	12:01 a.m. on the earlier
ed becember 11th 2018	
Signature of a member or authorized representative of a member	ा

Page 3 of 3

Filing Fee: \$25.00