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S. WARREN MAR 2 7 2018

# THE OZARK LAW FIRM, P.A.

#### Attorney at Law

2901 Manatee Avenue West, Suite 1010
Bradenton, Florida 34205
Telephone: (941) 750-9760
Facsimile: (941) 750-9761
DMOZARK@OZARKLAWFIRM.COM

DAMIAN M. OZARK

Admitted in Florida Admitted in Mississippi Admitted in Colorado

March 22, 2018

Secretary of State Registration Section Division of Corporation Post Office Box 6327 Tallahassee, Florida 32314

Re:

= LLC NAME AMENDMENT =

Dear Ladies and Gentlemen:

Enclosed herewith please find a Cover Letter, with Articles of Amendment to Articles of Organization of DAUNTING SITE WORK, LLC. Inadvertently, an "S" was left off of the word, "WORK" and should read, "WORKS."

We have also enclosed this firm's check, in the amount of \$30.00, to accomplish the amendment, with a Certificate of Status.

Your assistance in this matter is greatly appreciated. Should you have any questions or require anything additional, please do not hesitate to contact my office. In the interim, I remain,

Very truly yours,

Damian M. Øzark

DMO:ks Enclosures

### **COVER LETTER**

TO:

	egistration Se ivislon of Cor				
SUBJECT	DAUNTIN	G SITE WORK, LLC			
SUBJECT	•	Name of Lim	ited Liability Company		
The enclos	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please retu	rn all correspo	ndence concerning this matter	to the following:		
		DAMIAN M. OZARK			
			Name of Person		
		THE OZARK LAW FIRM	, P.A.		
	Firm/Company				
2901 MANATEE AVENUE WEST, STE. 101					
			Address		
		BRADENTON, FLORIDA	34205		
			City/State and Zip Code		
		DMOZARK@OZARKLAV			
For further	information c	E-mail address: ( oncerning this matter, please ca	to be used for future annual report not all:	ification)	
DAMIAN	M. OZARK		941 750-9760 at ( )		
	Name o	f Person		ne Telephone Number	
Enclosed is	s a check for th	ne 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/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	enter Circle		

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

DAUNTING SITE WORK, LLC				
( <u>Name of the Lim</u>	ited Liability Cor (A Florida Limit	npany as it now appears on our ed Liability Company)	records.)	
The Articles of Organization for this Limited 1	·	any were filed on MARCH 1.	2018 and a	ssigned
Florida document number L18000055482	·			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited l	iability company here:		
DAUNTING SITE WORKS, LLC				
The new name must be distinguishable and contain the	words "Limited L	ability Company," the designation	1 "LLC" or the abbreviation "	L.L.C."
Enter new principal offices address, if appli	icable:	N/A		
Principal office address MUST BE A STRE		)		
		N1/A		
Enter new mailing address, if applicable:	N/A			
(Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and registered agent and/or the new registered	· ·		ecords, enter the name	e of the
Name of New Registered Agent:	N/A			
Name of New Registered Agent:  New Registered Office Address:	N/A N/A			
		Enter Florida street	address	
			address, Florida Zip Cod	

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 little 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>	Address	Type of Action
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			□ Remove
			☐ Change
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		<u> </u>	□ Remove
			□ Change
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			Change
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			Change
			Add
			SECRETARY OF STATE   Remove
			AR 26 PH HASSEE, F
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D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necess	sary.)	
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Note:	ve date, if other than the date of filing:	(al) ling.) Pursuant to 60 late will not be lis	5.0207 (3)(b) ted as the
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.r 90th day after the record is filed.	n, on the earl	er of:
Dated	March 20 2018	SECR TALLA	<b>~~To</b> .
	Signature of a member or authorized representative of a member  Dam, and M. OZACK  Typed or printed name of signee	MAR 26 F	FILED
	Typed or printed name of signee	PM 2: 29  OF STATE E. FLORIDA	O
	Page 3 of 3	10F 10F 10F	

Filing Fee: \$25.00