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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

O SIMMONS JUL 26 2018



July 18, 2018

DEVIN HOKE 17750 43RD ROAD N LOXAHATCHEE, FL 33470

SUBJECT: DRH DEVELOPMENT, LLC

Ref. Number: L18000143412

We have received your document for DRH DEVELOPMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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

Letter Number: 518A00014746

Octavia L Simmons Regulatory Specialist III

TOTAL FASHED

7 700 8187

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DRH Development, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	oany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number <a href="https://limited.com/limited.co</th><th>y were filed on June 11, 2018</th><th> and assigned</th></tr><tr><td>This amendment is submitted to amend the following:</td><td></td><td></td></tr><tr><td>A. If amending name, <u>enter the new name of the limited lia</u></td><td>bility company here:</td><td></td></tr><tr><td>The new name must be distinguishable and contain the words " liab<="" limited="" td=""><td>bility Company," the designation "LLC" or</td><td>the abbreviation "L.L.C."</td>	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		1.5 6
Principal office address MUST BE A STREET ADDRESS)		JULY SE
Enter new mailing address, if applicable:		三 三 三
Mailing address MAY BE A POST OFFICE BOX)		ORIGINAL TO
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered egistered agent and/or the new registered office address he		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	CIREL CIOLIGI SILVEL GAGFESS	
	, Florid	daZiv Code
	City	гар слав

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Devin R. Hoke	17750 43rd Road N., Loxahatchee, ■	■ Add
			Remove
			☐ Change
MGRM Milagros Hoke	Milagros Hoke	17750 43rd Road N., Loxahatchee,	
			□ Remove
			■ Change
			
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ffective date, if other than the an effective date is listed, the date mus lote: If the date inserted in this bloocument's effective date on the Document's	be specific and cannot book does not meet the a	applicable statutory fil	more than 90 days after	ional) r filing.) Pursuant to 605.020 is date will not be listed as
e record specifies a delayed The 90th day after the reco	effective date, bu ord is filed.	it not an effective	e time, at 12:01	a.m. on the earlier o
June 25	2018			
	h/h/	·		
X in 1	Signature of a member of			

Page 3 of 3

Filing Fee: \$25.00