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COVER LETTER

	istration Sec ision of Corp						
SUBJECT:	DAX Enterp						
SUBJECT:		Name of Lim	ited Liability Company				
The enclosed	I Articles of A	amendment and fee(s) are sub	mitted for filing.				
Please return	all correspor	dence concerning this matter	to the following:				
		Danilo J. Tonel					
			Name of Person	· · · · · · · · · · · · · · · · · · ·			
		DAX Enteprises, LLC					
			Firm/Company				
		12065 Metro Parkway, Suite 201					
			Address				
		Fort Myers, FL 33966					
		•	City/State and Zip Code				
		daxenterprisesIlc2018@outl					
		E-mail address: (to be used for future annual report notif	ication)			
For further in	nformation co	ncerning this matter, please ca	all:				
Danilo J. To	nel		843 460-3277 at ()_				
	Name of	Person	Area Code Daytimo	Telephone Number			
Enclosed is a	check for the	e following amount:					
≡ \$ 25.00 F		S30.00 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited L</u> (A F	iability Compan Iorida Limited Li	i <mark>y as it now appears on</mark> ability Company)	our records.)	
The Articles of Organization for this Limited Liabil lorida document number L18000165744	ity Company v	were filed on <u>07/09/2</u>	2018	and assigned
This amendment is submitted to amend the following	ıg:			
a. If amending name, enter the new name of the	e limited liabil	lity company here:		
he new name must be distinguishable and contain the words	"Limited Liabili	ty Company," the design	iation "LLC" or the	abbreviation "L.L.C."
inter new principal offices address, if applicable	12065 Metro Parkwa	ay, Suite 201		
Principal office address MUST BE A STREET A		Fort Myers, FL 3396	5 6	
Enter new mailing address, if applicable:	W 75			
Mailing address MAY BE A POST OFFICE BOX	<u>X)</u>			
3. If amending the registered agent and/or regis gent and/or the new registered office address he	tered office a	ddress on our recoi	ds, <u>enter the</u> n	ame of the new regist
3. If amending the registered agent and/or registered agent and/or the new registered office address he Name of New Registered Agent:	stered office acere: Danilo J. Tonel		ds, <u>enter the</u> n	ame of the new regist
3. If amending the registered agent and/or regis gent and/or the new registered office address he Name of New Registered Agent:	stered office acere: Danilo J. Tonel	ddress on our recor rkway, Suite 201 Enter Florida s		ame of the new regist
3. If amending the registered agent and/or registered agent and/or the new registered office address he Name of New Registered Agent: New Registered Office Address:	stered office acere: Danilo J. Tonel	rkway, Suite 201		

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>	Address	Type of Action
P	Danilo J. Tonel	12065 Metro Parkway, Suite 201	□ Add
		Fort Myers, FL 33966	□Remove
VP	Maxmillyan S. Serrao	12065 Metro Parkway, Suite 201	□Add
		Fort Myers, FL 33966	□Remove
			■Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove

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lf an efi	ve date, if other than the date of filing: Ol/01/2024 (optional) ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a
docum	ent's effective date on the Department of State's records.
e recor	d 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 ed.
Dated	February 02 2024
Dated	Did 5. G.

Typed or printed name of signee