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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	curnent Number)	
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COVER LETTER

TO: Registration Section

Division of Co	rporations		
Dorceus B	lock LLC	•	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Elic Dorceus		
		Name of Person	
		Firm/Company	
	140 Nw 13th Ave		
		Address	
	DELRAY BEACH FL 33-	144	
		City/State and Zip Code	
	ed8508@yahoo.com	to be used for future annual report not	
for further information	concerning this matter, please c	·	(theaton)
Elie Dorceus		561 7741035 at ()	
Name	of Person	at () Area Code Daytin	ne Telephone Number
inclosed 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 Addre		Street Address:	and an
Registration Division of 0	Section Corporations	Registration Se Division of Co	
P.O. Box 63	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DORCEUS BLOCK LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 08/08/2018 and assigned
Florida document number L1800189748	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
	7 c 28
The new name must be distinguishable and contain the words "Limited Liabi	ility 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)	
Enter new mailing address, if applicable:	720 S SEACREST BLVD
Mailing address MAY BE A POST OFFICE BOX)	BOYNTON BEACH FL 33435
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records. enter the name of the new regist
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 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

Title	<u>Name</u>	Address	Type of Action
MGR	DORAMISE DORCEUS	4781 N CONGRESS AVE #2209	■ Add
		BOYNTON BEACH FL 33426	□Remove
			TChange
MGR	PAULINE DORCEUS	4781 N CONGRESS AVE #2209	
		BOYNTON BEACH FL 33426	⊔Remove
			FG & Change
			NA Add
			TALLAHASSEE, F. L. RIESA
			□Remove
			LIRemove
			UChange
			
			□Remove
			□ Change

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