## L18000190678

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## **COVER LETTER**

**Division of Corporations** DPHP ENTERPRISES LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Donovan Plank Name of Person Firm/Company 2780 NW 174th St Address Trenton, FL 32693 City/State and Zip Code dphpenterprises@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Donovan Plank Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

DPHP ENTERPRISES LLC				
( <u>Name of the Limited Li</u> (A F)	ability Company as it n orida Limited Liability (	ow appears on our recompany)	ords.)	<del>-, -</del>
The Articles of Organization for this Limited Liabili	ity Company were fi	led on <u>08/09/2018</u>		and assigned
Florida document number L18000190678	·			
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liability cor	mpany here:		
The new name must be distinguishable and contain the words	"Limited Liability Comp	nany," the designation "I	LC" or the abbrevia	
Enter new principal offices address, if applicable	<u></u>			<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)		폴란	<u>₩ 1</u>
			SSE SSE	8 1
			<u></u>	₹ !∏
Enter new mailing address, if applicable:			TST TST	ص و
(Mailing address MAY BE A POST OFFICE BOX			<u> </u>	£ 7
(maining address may be a rost of rice boa	<u> </u>			
B. If amending the registered agent and/or	registered office ad	ldress on our reco	ords, enter the	name of the ne
registered agent and/or the new registered office				•
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address.		Enter Florida street add	dress	
			Florida	
_	City			p 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, 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>	<u>Address</u>	Type of Action
MGR	Donovan Plank	2780 NW 174th St Trenton, FL 32693	
			Remove
			Change
MGR	Heather Plank	2780 NW 174th St Trenton, FL 32693	Add
		·	□ Remove
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Effective date, if other than the date	of filing:				∷> (optional)	7	
If an effective date is listed, the date must be sp. Note: If the date inserted in this block do document's effective date on the Department.	ecific and canno ses not meet th	ot be prior to he applicabl	date of filing or i e statutory fili	nore than 90 day	s after filing.) Po	irsuant te Il not be	o 605.0207 : listed as
he record specifies a delayed effe The 90th day after the record is	ctive date, s filed.	but not a	n effective	time, at 12	:01 a.m. on	the e	arlier of
April 6	20 <sup>.</sup>	19	•				
their	-						
Signat	ure of a membe	er or authoriz	ed representativ	of a member		<del>-</del>	-

Page 3 of 3

Filing Fee: \$25.00