L18000199244

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700317402137

08/2/13--01018--025 **25.00

18 AUG 22 PM 4: 46
SECKETARY OF STATE
ALL ZHASSET FLORINA

AUG 2 7 2019 T SCHROEDER

LAW OFFICES OUGHTERSON, SUNDHEIM AND ASSOCIATES, P.A. 612 SE Central Parkway Stuart, Florida 34994

PHONE: (772) 287-0660

FAX: (772) 287-0422

E-MAIL: oswpa@bellsouth.net

FREDERICK G. SUNDHEIM JR. SANDRA L. SUNDHEIM

WM. A. OUGHTERSON 1926 - 2015

August 21, 2018

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE:

Dunmore, LLC

Dear Sirs:

Enclosed are the following:

- 1. Articles of Amendment to Articles of Organization of Dunmore, LLC.
- 2. Our office check in the amount of \$25.00 to file the above.

Thank you very much.

Sincerely yours,

Sandra L. Sundheim

SLS/sn S-835C

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DUNMORE, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on August 20, 2018 and assigned Florida document number L18000199244 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: 중 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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>	Address	Type of Action
AMBR	CYNTHIA SHOGREN	7107 SE Golfhouse Drive	⊟ Add
		Hobe Sound, FL 33455	
			□ Remove
			Change
			☐ Remove
			SONE TO A
			O A Q III
			Remove C
			Add
			Remove
			Change
			_ _ _ _ \Add
		-	Remove
			□ Change
			□ Remove
			☐ Change

	<u>-</u>					
				· · · · · · · · · · · · · · · · · · ·		
			<u> </u>			
	<u> </u>		· · ·			
			<u> </u>			
				-	-	
			.	75		
				<u> </u>	aug	-1
		<u></u>		100	25/22	-
	·		<u></u> .		<u> </u>	1
				- E S A A		C
				ĕ≅	<u>-6</u>	
	_			_		
ective date, if other than the date of filing:	Quana	100,2	O/ 8 (options	il)	n to 605 (02 0 1
effective date is listed, the date must be specific and cannot te: If the date inserted in this block does not meet the	ie applicable sta	tutory filing requ	irements, this da	ite will not	be lister	d as
sument's effective date on the Department of State's	records.					
record specifies a delayed effective date,	but not an e	ffective time,	at 12:01 a.m	n. on the	earlie	r of
he 90th day after the record is filed.		,				
	_ 1	γ ,				
ded 8/21/18		1 /				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00