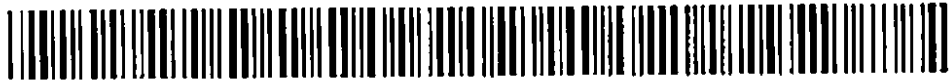


# L18000212507

Florida Department of State  
Division of Corporations  
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H180002721623ABC

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : MACFARLANE FERGUSON & MCMULLEN  
Account Number : 076077001654  
Phone : (813)273-4229  
Fax Number : (813)273-4396

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**MACFARLANE FERGUSON & McMULLEN**

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CLEARWATER, FLORIDA 33756  
(727) 442-8888 FAX (727) 442-8470

IN REPLY REFER TO:

Tampa

September 18, 2018

Division of Corporations  
Attn: Amendment Department

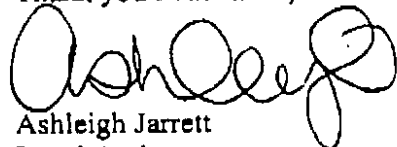
RE: Document Number L18000212507

Dear Examiner:

Please see the attached Amendment for the change of a member's name for banking purposes. This letter should be discarded as it is only an explanation and should not be scanned with the filing. Manager Woody Smith is legally Carroll W. Smith and the bank is requiring his full name on the Sunbiz site, which is why this amendment has the members name listed as a change.

Should you have any questions regarding this request, please do not hesitate to call me.

Thank you in advance,



Ashleigh Jarrett  
Legal Assistant to  
Charles A. Moore, Esquire  
William M. Stainton, Esquire

arj

(((H18000272162 3)))

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**  
**18 SEP 18 AM 3:19**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Digital Lighting, Engineering & Design, 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 September 7, 2018 and assigned  
Florida document number L18000212507.

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 "L.L.C."

Enter new principal offices address, if applicable: \_\_\_\_\_

(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 Florida 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 Changing Registered Agent, Signature of New Registered Agent

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(((H18000272162 3)))  
 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>	<u>Type of Action</u>
MGR	Carroll W. Smith	625 Court Street, Suite 200	<input type="checkbox"/> Add
		Clearwater, Florida 33756	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 DALLAS COUNTY, TEXAS

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)  
(If an effective 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 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated September 18 2018

Signature of a member or authorized representative of a member

**J. Matthew Marquardt**

Typed or printed name of signer

Page 3 of 3

**Filing Fee: \$25.00**

((H18000272162 3)))