118000252849

(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



200320299262

11/05/18--01031--021 **SL.60

AND LEW -S AN 9: 57

buend

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Darcedge	LLC	
	Name of Lim	ited Liability Company	<u></u>
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing	
	condence concerning this matter	_	
rease return an corresp	Jonather Concerning and Marie	to the rollowing.	
		David Petrenk	D
		Name of Person	
	D	arcedge LLC	
	5	342 Clark td 1	VVM 3039
		Address	
	Sa	crasota 342 au City/State and Zip Code au n daniel a gmail.	.33
	, , can	City/State and Zip Code	ئر. 21 مدر سندر محمد المحمد الم
	david como	to be used for future annual report not	COM fication)
For further information	concerning this matter, please c		. ت ا ا
	_		
David	Petrenko	at (215) 403-	6903 e Telephone Number
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed 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)
Regis	LING ADDRESS: stration Section sion of Corporations	STREET/COUR Registration Section Division of Corpo	on
P.O.	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Co	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		;
ARTICLES OF	F AMENDMENT TO ORGANIZATION OF	
Darcedge	pany as it now appears on our records.) d Liability Company)	
the Articles of Organization for this Limited Liability Compart lorida document number L 18000 25 2849.	ny were filed on	nd assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lis	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "LLC" or the abbrevia	tion "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
s. If amending the registered agent and/or registered egistered agent and/or the new registered office address h	office address on our records, <u>enter the</u> ere:	name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida Zi	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 Type of Action **Address Title** Name TOM GLOVER 3030 N. ROCKY POINT DR _ Add AP STE 150 A TAMPA FL 33607 US □ Remove ☐ Change David Petrenko 5342 Clark Rd num 3039 Add Sarasota FL 34322 DS CRemove ☐ Change □ Add □ Remove Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove _ Change

	·	• ·.
		
-		
lective .	late, if other than the date of filing: (optional)	
n effecti	e 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 e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	
	s effective date on the Department of State's records.	noted to
recor	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the each day after the record is filed.	arlier d
,,,,	in day after the record is med.	
ited	11/02/2018	
		_
<u>-</u>	Signature of a member or authorized representative of a member David Petrenko Typed or printed name of signee	-

Page 3 of 3

Filing Fee: \$25.00