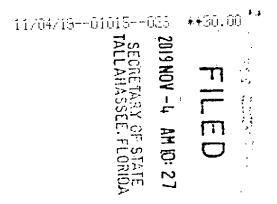
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### **COVER LETTER**

FO:	Registration Se Division of Cor			
	D.A.R.C. I	Enterprises LLC		
SUBJE	ECT:	Name of Lim	ited Liability Company	
The end	closed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		John W. Roberts		
			Name of Person	. <u> </u>
		Law Offices of John W. R	loberts, PLLC	
			Firm/Company	
		12273 US Highway 98 W	est, Suite 204	
			Address	
		Miramar Beach, Florida 3	32550	
		christina@johnwrobertslav	City/State and Zip Code v.com	
		E-mail address: (	to be used for future annual report notifi	cation)
For fur	ther information co	oncerning this matter, please c	all:	
John <sup>3</sup>	W. Roberts		850 250-0887	
	Name of	f Person	at () Area Code Daytime	Telephone Number
Enclos	ed is a check for th	e following amount:		
□ <b>\$</b> 2:	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed:	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: 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

D.A.R.C Enterprises 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 \_\_\_\_\_ and assigned 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: (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 registered agent and/or the new registered office address here: name of the new Law Offices of John W. Roberts, PLLC Name of New Registered Agent: 12273 US Highway 98 West, Suite 201 New Registered Office Address: Enter Florida street address . Florida 32550
Zip Code Miramar Beach

#### 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.

City

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	John W. Roberts	8340 Front Beach Road Panama City Beach, FL 32408	Add
			_ ■ Remove
4.840.0			□ Change
AMBR	<del></del>	<del></del>	D Add
			Remove
			Change
			Remove
			□ Change
			□ Remove
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			□ Remove
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			Add
		<del></del>	☐ Remove
			Change

D. If amen	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<u></u>	
_	
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F Fffactive	01/14/2019 e date, if other than the date of filing:(optional)
(If an effec <u>Note:</u> If	ive 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)( the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the t's effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed.
Dated _	get Nos 1 2019
	ALS .
	Signature of a member or authorized representative of a member  Sha W. Lohel
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00