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(Requ	iestor's Name)	
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FLORIDA FILING & SEARCH SERVICES, INC.

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 5/4/20

NAME: DAPPIR LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

. .

TO:

Tallahassee, FL 32314

TO: Registration So Division of Cor			
SUBJECT: Dappir L			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	James Scott		
		Name of Person	
	Dappir LLC		
		Firm/Company	
	202 S Parker Street		
		Address	
	Tampa, FL 33606		
		City/State and Zip Code	
	james@dappirclean. E-mail address: (COM to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
James Scott		at (<u>813</u>) <u>336-2679</u>	<u> </u>
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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)
Mailing Addres		Street Address:	
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632	•	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 2000 II

OF

2020 HAY -4 Aii 8: 50

Dappir LLC

(Name of the Limited Liability Company as it now appears on our records.)

	DIT LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1900037893</u> .	were filed on Feb 06, 2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi"	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	202 S Parker Street
(Principal office address MUST BE A STREET ADDRESS)	# 543
	<u>Tampa</u> , FL 33606
Enter new mailing address, if applicable:	202 S Parker Street
Mailing address MAY BE A POST OFFICE BOX)	# 543
	Tampa, FL 33606
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the name of the new regis
	. Florida
	City 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

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 = A	uthorized Member	2020 HAY _	li Air -
<u>Title</u>	<u>Name</u>	Address	li Ail 8: 500 of Action
AMBR	Damaris Scott	202 S Parker Street	<u>↓</u> ⊠ Add
		#543	□Remove
		Tampa, FL 33606	Change
			□ Add
			□Remove
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			Remove
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Page 2 of 3

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ecord specifies a delayed effective date, but not an effective time, at a good effective time, and a g	12:01 a.m.	on the earlie
4 May 2020		
James Scott.		
Signature of a member or authorized representative of a member		

Filing Fee: \$25.00