## 119000 156092

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bo	usiness Entity Nam	ne)
(Do	ocument Number)	
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## **COVER LETTER**

TO:	Registration Sec Division of Corp		T V	
CHD II	DI-AN 2, L			
SUBJE	CT:		ted Liability Company	
		Amendment and fee(s) are subr		
ricase	returi ali correspoi	Diane Chambre	to the following.	
			Name of Person	
			Firm/Company	
		4560 Estero Blvd., Unit 50	I	
			Address	
		Ft. Myers Beach, FL 33931		
		andy@airscience.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notil	ication)
For fur	ther information co	oncerning this matter, please ca	itt:	
Diane	Chambre		239 246-0366 at ()	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclose	ed is a check for th	e following amount:		
\$2:	5.00 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 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



DI-AN 2, LLC

company has been notified in writing of this change.

2019 11 28 PH 3:52

( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our record liability Company) ,	<u> s.</u> )
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000156092}{L19000156092}$ .	were filed on June 21, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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:		, design est
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:		s, enter the name of the
	_	
New Registered Office Address:	Enter Florida street addres	ss
	, FI	orida
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete		

If Changing Registered Agent, Signature of New Registered Agent

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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Andre G. Chambre Family Trust e/u/a/d March 18, 2003	4560 Estero Blvd., Unit 501 Ft. Myers Beach, FL 33931	
			□ Remove
			☐ Change
AMBR Diane D. Chambre Rev. Trust dated March 18, 2003	4560 Estero Blvd., Unit 501 Ft. Myers Beach, FL 33931	Add	
		Remove	
			Change
MGMR	MGMR Diane D. Chambre Trust	4560 Estero Blvd., Unit 501 Ft. Myers Beach, FL 33931	□ Add
		■ Remove	
			☐ Change
			Add
			□ Remove
			Change
			Add
	<del></del>	□ Remove	
		Change	
		<del></del>	Add
			□ Remove
			Change

<del></del>	
(If an effective dat Note: If the dat	, if other than the date of filing:
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ay after the record is filed.
Dated	8-27. 2019  Kliane Chamber  Signature of a member or authorized representative of a member
	Eliane Chambre
	Signature of a member or authorized representative of a member
Dia	ne Chambre

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Filing Fee: \$25.00