

L19000 220087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

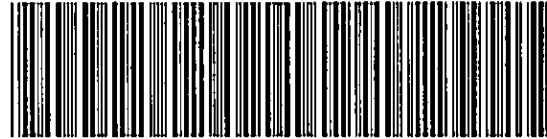
(Business Entity Name)

(Document Number)

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05/05/20--01014--002

2020 JUN 15 PM 6:53

O SIMMONS
JUN 17 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DUKE SECURITY SERVICES XXIII LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DUKENS LAPLANTE

Name of Person

DUKE SECURITY SERVICES XXIII LLC

Firm/Company

2700 W ATLANTIC BLVD

Address

POMPANOP BEACH

City/State and Zip Code

LAPLANTEDUKENBS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DUKENS LAPLANTE

9545889218

at ()

Name of Person

Area Code

Daytime 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUN 15 PM 1:54

June 2, 2020

DUKENS LAPLANTE
272 NE 47TH ST
POMPANO BEACH, FL 33069

SUBJECT: DUKE SECURITY SERVICES XXIII, LLC
Ref. Number: L19000220087

We have received your document for DUKE SECURITY SERVICES XXIII, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 720A00010879



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUL - 1 PM 12:58

May 20, 2020

DUKENS LAPLANTE
2700 W ATLANTIC BLVD
POMPANO BEACH, FL 33069

SUBJECT: DUKE SECURITY SERVICES XXIII, LLC
Ref. Number: L19000220087

We have received your document for DUKE SECURITY SERVICES XXIII, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 520A00010200

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

DUKE SECURITY SERVICES XXIII LLC

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

2020 JUL 15 PM 6:53

The Articles of Organization for this Limited Liability Company were filed on 08292019 and assigned
Florida document number L19000220087

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RED DOT SECURITY SERVICES XXIII LLC

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)

2700 W ATLANTIC BLVD

POMPANO BEACH FL 33069

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

272 NE 47TH STREET

POMPANO BEACH FL 33069

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:

DUKENS LAPLANTE

New Registered Office Address:

2700 W ATLANTIC BLVD

Enter Florida street address

POMPANO BEACH

City

Florida 33069

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 = Authorized Member

2020 JUN 15 PM 6:53

Title	Name	Address	Type of Action
P	DUKENS LAPLANTE	2700 W ATLANTIC BLVD SUITE 108	<input type="checkbox"/> Add
		POMPANO BEACH FL 33069	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	RITCH DESRAVINES	2700 W ATLANTIC BLVD SUITE 108	<input type="checkbox"/> Add
		POMPANO BEACH FL 33069	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DUKENS LAPLANTE	2700 W ATLANTIC BLVD SUITE 108	<input type="checkbox"/> Add
		POMPANO BEACH FL 33069	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

2020 JUN 15 PM 6:53

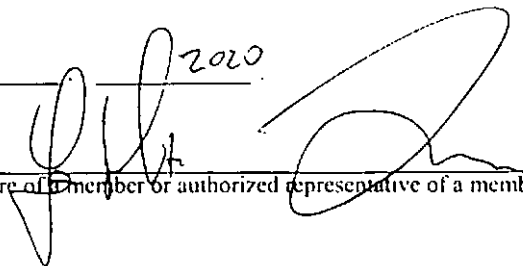
E. Effective date, if other than the date of filing: 08282019 (optional)

(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 June 9th 2020



Signature of member or authorized representative of a member

DUKENS LAPLANTE

Typed or printed name of signee