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R. WHITE

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COVER LETTER

TO:

	Registration Se Division of Cor				
eun ie <i>c</i>	DC & Nanc	ey LLC			
SUBJEC	1:	Name of Limi	ited Liability Company		
The enclo	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		James Batson, Jr.			
			Name of Person		
			Firm/Company		
		10135 SE 144th Place			
			Address		
		Summerfield, Florida 3449	1		
			City/State and Zip Code		
		quickde@yahoo.com	to be used for future annual report noti-	fication)	
For furthe	er information c	oncerning this matter, please ca	-		
James Ba	itson, Jr.		352 287-5152		
	Name o	f Person		e Telephone Number	
Enclosed	is a check for the	he following amount:			
\$25.0	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:	ation.	
Registration Section Division of Corporations		Registration Sec Division of Cor			
	P.O. Box 632		The Centre of T	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DC & Nancy LLC

2019 DEC 17 PM 4: 22

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

(A Florida Enim	ted Elability Company)			
The Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for the	any were filed on Octo	ober 2, 2019 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	liability company her	<u>re</u> :		
The new name must be distinguishable and contain the words "Limited L	iability Company," the de	signation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	10135 SE 144th	10135 SE 144th Place		
(Principal office address MUST BE A STREET ADDRESS	Summerfield, Flo	orida 34491		
Enter new mailing address, if applicable:	10135 SE 144th	Płace		
(Mailing address MAY BE A POST OFFICE BOX)	Summerfield, Flo	orida 34491		
B. If amending the registered agent and/or registered office and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 10135 SE 1	44th Place Enter Flori	da street address		
Summerfiel		, Florida 34491 Zip Code		
	Ciry	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MBR	Nancy A. Disciascio	5 Linder Drive	□ Add
		Homosassa, Florida 34446	■Remove
			□Change
			□Add
			□Remove
			□Change
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			☐ Change

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fective date, if other than the da	ate of filing:)	(optional)	
on effective date is listed, the date must be total. If the date inserted in this block becament's effective date on the Department.	e specific and cannot be pri- k does not meet the appl	icable statutory filing	re than 90 days after filing.)	
record specifies a delayed e The 90th day after the recor		not an effective ti	me, at 12:01 a.m. o	n the earlier of
December 11,	2019	·		
	7-			
مسد	75			
Si	gnature of a member or aut	thorized representative of	f a member	

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Filing Fee: \$25.00