119000277722

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DEC 12 2019 M. SOLOMON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallnassee, FL 3230 Phone: 850-558-1500

	REFERENCE	: 096215	8273362
	AUTHORIZATION	Lovello of	
	COST LIMIT	* Synelliele : \$ 25.00	Till
ORDER DATE :	December 10, 2019		
ORDER TIME :	12:30 PM		

CUSTOMER NO: 8273362

ORDER NO. : 096215-005

ACCOUNT NO. : I2000000195

DOMESTIC AMENDMENT FILING

NAME: DARTMORE MARINE LLC

EFFECTIVE DATE:

ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER'S INITIALS:

COVER LETTER

TO:	Registration S Division of Co	Section rporations		
SUBJEC		Marine LLC		
SUBJEC	1	Name of Lin	nited Liability Company	
Division of Corporations Dartmore Marine LLC Name of Limited Liability Company The enclosed Articles of Amendment and fce(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Pam Lillic Name of Person Dartmore Marine LLC Firm/Company 4300 E. Fifth Avenue Address Columbus OH 43219 City/State and Zip Code CorpAnnualreports@vcf.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Pam Lillie Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Certificate of Status Certificate Copy (additional copy is enclosed) Mailling Address: Registration Section Division of Corporations Street Address: Registration Section Division of Corporations				
Please ret	urn all corresp	ondence concerning this matter	r to the following:	
		Pam Lillic		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		Dartmore Marine LLC		
			Firm/Company	
		4300 E. Fifth Avenue		
		Pam Lillie Name of Person Dartmore Marine LLC Firm/Company 4300 E. Fifth Avenue Address Columbus OH 43219 City/State and Zip Code CorpAnnualreports@vcf.com E-mail address: (to be used for future annual report notification) formation concerning this matter, please call: Name of Person Area Code Daytime Telephone Number		
		Columbus OH 43219		
			City/State and Zip Code	
		CorpAnnualreports@vcf.co	om	
		E-mail address: (to be used for future annual report	notification)
For further	information c	oncerning this matter, please c	all:	
Pam Lillie				
-	Name o	f Person	Area Code Da	ytime Telephone Number
Enclosed is	s a check for th	ne following amount:		
□ \$25.00) Filing Fee		Certified Copy	Certificate of Status & Certified Copy
R D P.	egistration S	ection orporations 7	Registration Division of C The Centre of	Section

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dartmore Marine LLC		
(Name of the Limited Liability Co (A Florida Limi	empany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on November 20, 2019	and assigned
Florida document number L19000277722		_
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited L	liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2
Principal office address MUST BE A STREET ADDRESS	2	
		.: .: .: .: .: .: .: .: .: .: .: .: .: .
nter new mailing address, if applicable:		71 TO
Mailing address MAY BE A POST OFFICE BOX)		
		13 to 1
. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, <u>enter the na</u> i	ne of the new register
Name of New Registered Agent:		
New Registered Office Address:	From File (1)	
	Enter Florida street address	
	, Florida	
	Cuy	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 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>	Name	Address	Type of Action
Manager	Tod H. Friedman	4300 E. Fifth Avenue	\ Add
		Columbus OH 43219	_
			□ Change
Manager	Brian T. Strayton	4300 E. Fifth Avenue	⊟ Add
		Columbus OH 43219	□ Remove
			Change
			□Add
			Remove
			☐ Change ☐ Change ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□Remove
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			CRemove
			Change
			□Add
			□Remove

							
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fan effect <u>Note:</u> If	e date, if other than the ive date is listed, the date mu the date inserted in this b t's effective date on the I	e date of filing: ast be specific and ca clock does not mee	nnot be prior to	date of filing or mo	requirements, th	tional) er filing.) Pursua nis date will not	nt to 605.020 t be listed a
record s	specifies a delayed effecti-	ve date, but not an	effective time	e, at 12:01 a.m. o	n the earlier of: ((b) The 90th o	lay after the
	ecember 10	· · · · · · · · · · · · · · · · · · ·	2019				
ated		· h					
ated		Signature of a mer	nber or authoriz	er representative o	f a member	 	

Filing Fee: \$25.00