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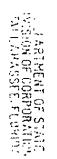
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2020 FEB -7 AM 7: 11

MAR 0 4 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Dau Sens Hadre G	nited Liability Company	
The enclosed Articles of Amendment and fee(s) are su	bmitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
CALBERT R	Name of Person	
	Firm/Company	
222 SE	1 St Cir. Address	
•	City/State and Zip Code City/State and Zip Code Code Gingil.Code (to be used for future annual report notific	M cation)
For further information concerning this matter, please		
CALGERT DAWS Name of Person	at (951) 909 - 80 Area Code Daytime	290 Telephone Number
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section	Street Address: Registration Sect	ion

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Com	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar	ny were filed on Jan. 27, 2020 and dissigned
Florida document number <u>L200,0032298</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
N/A	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter the name of the new registered</u>
	ert Rudolph Dawsn
New Registered Office Address: 222	SE 1st Cire Enter Florida street address
Brynto 1	Reach FL , Florida 33435 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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Rudolph, Dawson C	202 SE 1st Circle Boyaton Beach	DAdd
		Fh. 1 33-135	Kemove
		 	
MGR	CALBERT R. DAWEN	222 SE 254 Circle Bayoton Beach,	ID/Add
		FL 33435	□ Remove
			□Change
			🖸 Add
			□Remove
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ective date, if othe effective date is listed, e: If the date inserte ument's effective da	the date must be speci ed in this block does	ific and cannot be prions not meet the application	cable statutory filing	(option one than 90 days after than 90 days after the grequirements, this	nal) iling.) Pursuant to 605.02 date will not be listed:
cord specifies a dela s filed.	yed effective date, b	out not an effective t	ime, at 12:01 a.m. (on the earlier of: (b)	The 90th day after th
ed <u>February</u>	<u> </u>	2020	·		
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Filing Fee: \$25.00