## 120000077271

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T. MATTHEWS MAR 29 2022

## **COVER LETTER**

TO:	Registration Section Division of Corpor	4 :						
eun re	Zion.	D	25	$G_{1}$	JTTFRS	SE	0.111.05-1	L.C.
SUBJE	CI:	<u></u>	Ni Ni	ime of Lin	ited Liability Co	ompany	201003	<u> </u>
The enc	losed Articles of Am	endmei	nt and fee(	s) are sut	mitted for fili	ıg.		
Please r	eturn all corresponde	nce cor	cerning th	nis matter	to the following	ng:		
					Sebustic Name of			
			DR	ري (	TUTTEES Firm/Co	ombani. DEBO	ICES L.	L C
					Lions C			
		Cas	<u>selbe</u>	144	F\City/State an	d Zip Code	32707	<u>-</u>
	-		E-mail	UTTER Laddress: (	SDS & GA to be used for fi	APIL. ()	M eport notification	on)
For furt	her information conc	erning t	his matter	, please c	all:			
Ju.	un S. S.	alin	, <b>Ϥ</b> ͺͿ		at ( <u>U</u>	07- a Code	731 - 97 Daytime Tele	-68 ephone Number
Enclose	d is a check for the fo	ollowin	g amount:					
<b>5k</b> \$25	.00 Filing Fee (		00 Filing I tificate of		Certific	Filing Fee & ed Copy al copy is enclo		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address:	tian				Street Add	iress:	

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

D&S CUTIF	ies Sceu	1CES L.L.C.	22 157 1	7 (119:25
(Name of the Limite	d Liability Compa A Florida Limited	iny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Li		were filed on 03 -	-14-2022	and assigned
Florida document number <u>L20000</u> 7	1271			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company." the design	nation "LLC" or the abl	oreviation "L.L.C."
Enter new principal offices address, if applica	ıble:	<u></u>		···
(Principal office address MUST BE A STREE)	T ADDRESS)			<del></del>
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I	<u>30X)</u>	<u></u>		
			_	
B. If amending the registered agent and/or reagent and/or the new registered office addres	egistered office : <u>s here</u> :	address on our recor	ds, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:				
New Registered Office Address:	2125 5	Emer Floridas Park City	reet address	<del> </del>
	Winter	Park	Florida	32792 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>	<u>Name</u>	Address	Type of Action
MGR	DANIEL LOZANO	3820 BENSON PARK BLUD	□Add
		ORLANDU FL	<b>X</b> Remove
		25 to	□ Change
MGR	Luis GAEZON	24411 DREW GAP	<b>. ⊠</b> Add
		SAN ANTONIO, TX	□Remove
		78255	□Change
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l is fi	
ated	<u>03-14-2022</u> .
	Signature of a member or authorized representative of a member
	Typed or printed name of signee