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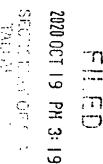
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## **COVER LETTER**

Division of Cor		*	
.D K & SO:	NS SERVICES, LLC		
NOBSECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Alicia Kłotz		
		Name of Person	<del></del>
	<del></del>	Address  City/State and Zip Code  mail.com  address: (to be used for future annual report notification)  please call:  at (	
	Alicia Klotz.  Name of Person  Firm/Company  2037 Holley Timber Rd  Address  Cottondale/F1 32431  City/State and Zip Code  dksonsservices@gmail.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  ia Klotz.  850 5572512		
	Cottondale/Fl 32431	Address	
	-	•	
	<del>-</del>		fication)
For further information c	oncerning this matter, please c	all:	
Alicia Klotz			
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration S Division of C	Section	Registration Se	
P.O. Box 632			•

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D K & SONS SERVICES, LLC		
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appears on our records.) ability Company)	·
The Articles of Organization for this Limited Liability Company	were filed on 05/18/2020	and assigned
lorida document number L20000133446		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabili	ty 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)		S 28
		- <u>50</u>
		물를 끌고
inter new mailing address, if applicable:		9 7
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		္ မွ
		?
3. If amending the registered agent and/or registered office a igent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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 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
AMBR	Dakota Kłotz	2037 Holley Timber Rd. Cottondale, Fl. 32431	<b>=</b> Add
			□Remove
			□ Change
<del></del>		<del>.</del>	□Add
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Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the Defective date on the Defective date.	t be specific and cannot be pri ock does not meet the appl	licable statutory filing	(optional) ore than 90 days after filing.) g requirements, this date w	Pursuant to 605,0207 (3 will not be listed as th
he record specifies a delayed effectivord is filed.	e date, but not an effective	time, at 12:01 a.m. c	on the earlier of: (b) The	90th day after the
Dated October 7	. 2020	·		
_ acein	Signature of a member or au	thorized representative	of a member	
A 37 . 1 . 1 . 1	-			
Alicia Klotz	Tuned or wi	nted name of signee	<del></del>	<del></del>

. . . .

Filing Fee: \$25.00