## LZ0000321322

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

Division of Cor		·		
SUBJECT:	Daybreak	Rising L.L.C		
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	Willian	M A. Colon Name of Person		
		Firm/Company	<del></del> ·,	P-200
	632 SW1	32nd Terrace Address	·	2721 COT 25
		Address		
	Davie	FL 33325 City/State and Zip Code	<u> </u>	P : .
		City/State and Zip Code		-
	E-mail address:	lon 89 A g/nai . Com to be used for future annual report notific	cation)	ري
For further information c	oncerning this matter, please c			
William Name o	Colon f Person	at (754) 301-1 Area Code Daytime	744 Telephone Number	
Enclosed is a check for th	ne following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of St Certified Copy (additional copy is o	atus &
Mailing Addres Registration S		Street Address: Registration Sect	ion	
Division of C		Division of Corn		

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

Day Break Rising	L.L.C	
( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited Liability Company were Florida document number <u>L20000321322</u> .	e filed on 10/17/70	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbu	reviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	u 3
	•	(), (), (),
Enter new mailing address, if applicable:	:	<u></u> .
(Mailing address MAY BE A POST OFFICE BOX)	1	<i>i</i> ;
		ری
B. If amending the registered agent and/or registered office addressed agent and/or the new registered office address here:	ess on our records, <u>enter the name</u>	of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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>	Name	Address	Type of Action
AMBR	William A. Colon	632 SW 132nd Tellace	X∕Add
		Davie, FL 33725	□Remove
			Change
			🗆 Add
			Remove
		· · · · · · · · · · · · · · · · · · ·	CDChange
			DAdd
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n effec ote: T	We date, if other the ctive date is listed, the f the date inserted int's effective date of	n this block does r	e and cannot to not meet the	be prior to da applicable	te of filing or :	more than 90		
is file						on the earl	ier of: (b) The	e 90th day after th
	October	27 Willed	<u>, 70</u>	070	0.1			