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COVER LETTER

TO:

TO: Registration Division of C	Section orporations		
DG FAH	MY, LLC		
	Name of Li	mited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are su	bmitted for filing.	
	ondence concerning this matte		
	DANIEL G FAHMY		
		Name of Person	
	DG FAHMY, LLC		
		Firm/Company	
	6795 SW 98TH ST		
		Address	
	MIAMI/FL/33156		
	DFAHMY33@YAHOO.C	City/State and Zip Code	
	-	(to be used for future annual report noti	figurios)
For further information of	concerning this matter, please of		neation
DANIEL G FAHMY		305 968-1081	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration	Section	Street Address: Registration Sec	
Division of C P.O. Box 632		Division of Con	
Tallahassee, l		The Centre of T 2415 N. Monroe	allahassee Street, Suite 810
1 analiassee, FL 32314		=	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DG tahmy, LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Company)	w appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6
(Principal office address MUST BE A STREET ADDRESS)	•
	
Enter new mailing address, if applicable:	Í.
	ي ي
B. If amending the registered agent and/or registered office address on agent and/or the new registered office address here:	on our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
City	, Florida Zip Code
·	ир Соае
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	DANIEL G FAHMY	6795 SW 98TH ST, MIAMI/FL/33156	≅Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			Remove
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			□Change
<u></u>			□ Add
			□Remove
			Change

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