120000324232

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Ryan M. Prisock Phone: 314-719-3760 rprisock@salawus.com

November 16, 2020

VIA U.S. CERTIFIED MAIL

9314 8699 0430 0076 9532 80Registration SectionDivision of CorporationsP.O. Box 6327Tallahassee, FL 32314

RE: DY & SON PROPERTY, LLC fka DY & SONS CLEANING, LLC L20000324232

To Whom It May Concern:

This firm represents DY & Sons Property, LLC fka DY & Sons Cleaning, LLC. Please find enclosed a cover sheet/letter and Articles of Amendment to Articles of Organization of DY & SONS CLEANING, LLC, amending the name to DY & SONS PROPERTY, LLC. Please also find enclosed a check for \$25.00 to pay for the filing fee.

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Also, while the registered agent is the same, the original Articles of Organization for DY & SONS CLEANING, LLC filed on October 13, 2020, included a typographical error in the registered agent's name. As DY & Sons Property, LLC is not changing its registered agent, we do not include a change of registered agent in the Articles of Amendment to Articles of Organization form. However, please note that the correct spelling to the registered agent name is "Corporation Service Company".

Very truly yours, SmithAmundsen LLC

By: <u>Hymnell</u> Ryan M. Prisock

Enclosures/



TO: Registration Section Division of Corporations

DY & SONS CLEANING, LLC SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ryan M. Prisock

Name of Person

SmithAmundsen, LLC

Firm/Company

120 S. Central Ave., Ste. 700

Address

St. Louis, MO 63105

City/State and Zip Code

rprisock@salawus.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Ryan M. Prisock
 314
 719-3760

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

\$ 25.0) Filing	Fee
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S30.00 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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: 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 Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa-	ny were filed on October 13, 2020	and assigned
Florida document number 1.20000324232		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
DY & SONS PROPERTY, LLC		
The new name must be distinguishable and contain the words "Limited Lia	ibility 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: (Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

n/a

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street (address
		, Florida
	Cüy	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

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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>	<u>Address</u>	Type of Action
			🗆 Add
			🗆 Change
			□Add
			🗆 Add
			□Change
			🗆 Add
			Change
			🖸 Add
		🗆 Remove	
			🗆 Add
			□ Change

D. If amending any other info	mation, enter change(s) here:	(Attach additional sheets, if necessary.)
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Effective date, if other than the of (If an effective date is listed, the date must	late of filing:		Gline as more than I	(optional)	August to 605 0207 (3)
<u>Note:</u> If the date inserted in this blo	be specific and cannot a	applicable stati	tory filing requir	ements this date w	ill not be listed as the
document's effective date on the De	partment of State's r	ecords.	norý ning requi		
abeument a criterive and brine be					
ie record specifies a delayed effective	date, but not an effe	ctive time, at 12	2:01 a.m. on the e	arlier of: (b) The	90th day after the
ord is filed.					
NOVEMBER D	2020				
NOVEMBER 12 Dated	2020				
	Signature of a member				
	signature of a member	or authorized rep	resemative of a mer	noci	
RYAN M. PRISOCK					
	Typed	or printed name o	of signee		