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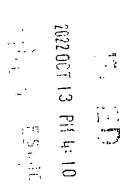
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Special Instructions to	Filing Officer:	





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JAN = 6 2023

COVER LETTER

TO:

Tallahassee, FL 32314

nitted for filing. o the following: Name of Person	
nitted for filing. o the following: Name of Person Firm/Company	
nitted for filing. o the following: Name of Person Firm/Company	
Name of Person Firm/Company	
DMH Rental & Realty, LLC Firm/Company 65 S. Tyler St	
Firm/Company	
Firm/Company	
Firm/Company	
	
Address	
Address	
	•
City/State and Zip Code	
be used for future annual rep	port notification)
Area Code	Daytime Telephone Number
Certified Copy	Certificate of Status & Certified Copy
Street Add	ress:
Registrati	on Section
	of Corporations re of Tallahassee
	City/State and Zip Code to be used for future annual rep II: 352 476-3 at () Area Code S55.00 Filing Fee & Certified Copy (additional copy is enclosed) Street Add Registration

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DMH Rental & Realty, LLC

2622 OCT 13 PH 4: 10

				<u> 1 </u>
(<u>Name of the Limited Liability</u> (A Florida	y Company as Limited Liabilit	t now appears on (v Company)	our records.)	
			(1)	ENGIE .
The Articles of Organization for this Limited Liability Co	ompany were	filed on February	y 15, 2021	and assigned
Florida document number				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability o	ompany here:		
DMH, LLC	•	 _		
The new name must be distinguishable and contain the words "Limit	ited Liability Co	mnany " the design:	ation "LLC" or th	ne abbreviation "L.L.C."
The new haire mass or distinguishable and contain the words. Emili	nea maonity co	inputty. The design		e don't videon is as a
Enter new principal offices address, if applicable:				<u> </u>
(Principal office address MUST BE A STREET ADDRE	<u>ESS)</u>			
Enter your mailing address if applicables				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	_		···-	
				
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office addre	ss on our recor	ds, <u>enter the r</u>	ame of the new registere
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address.		Enter Florida st	reet address	
			. Florida	
	(ity .	, FIOFIUA	Zip Code
New Registered Agent's Signature, if changing Registered	l Agent:			
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete perfo gent as provid	ormance of my d led for in Chap	luties, and La ter 605, F.S.	m familiar with and Or, if this document is
	If Changing I	Registered Agent, S	ignature 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
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			Remove
			□Change
			□Add
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ffective date, if other th	an the date of filing:			(optional)	
an effective date is listed, the content of the content in the date inserted in	date must be specific and car this block does not mee	nnot be prior to date It the applicable st	of filing or more than 9 atutory filing require	00 days after filing.) Pur ements, this date will	suant to 605.0201 not be listed as
ocument's effective date or					
record enouities a delayed	effective date, but not an	effective time, at	12:01 a.m. on the ea	arlier of: (b) The 90	th day after the
	2	2022			
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Filing Fee: \$25.00