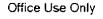
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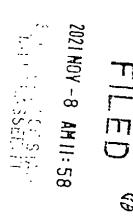
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Special Instructions to	Filing Officer:				
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C. BRUMBLEY NOV 29 2021

## **COVER LETTER**

Registration Section Division of Corporations

TO:

DAWZS D	.Z. LLC		•	
SUBJECT.	Name of Lin	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:		
	Zuryn Dominguez			
	Name of Person			
	DAWZS D.Z. LLC			
		Firm/Company	<del>-</del> .	
	9846 Bernwood Pt Dr			
		Address		
	Fort Myers FL, 33966			
	· ·	City/State and Zip Code		
	zuryn_012@yalioo.com			
	E-mail address: (	to be used for future annual report no	otification)	
For further information of	oncerning this matter, please c	all:		
Zuryn Dominguez		239 286-5091 at ( )		
Name of Person			me Telephone Number	
Enclosed is a check for the	he following amount:			
S25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>	
Mailing Address Registration 9 Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 27	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oe Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAWES D.E. LLC		
(Name of the Limited Liability Compa (A Florida Limited	i <mark>ny as it now appears on our recor</mark> Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Company Florida document number L21000169972		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "LLe	
Enter new principal offices address, if applicable:	5000 Lee Cir S	<b>2021</b> See To
(Principal office address MUST BE A STREET ADDRESS)	Lehigh Acres FL, 33971	, ð n
		1
Enter new mailing address, if applicable:	5000 Lee Cir S	
(Mailing address MAY BE A POST OFFICE BOX)	Lehigh Acres FL, 33971	ŭ
	-	<del></del>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, <u>enter</u> Enter Florida street addre	
	, r , r	lorida
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as a being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, a provided for in Chapter 605,	and I am familiar with and F.S. Or, if this document is

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 adde or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Deivys Fundora	5000 LEE CIR S Lehigh Acres FL, 33971	
			□Remove
		<del></del>	□Change
			□Add
			□Remove
			□Change
			□Add
		<del>.</del>	□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amen	ding any other infor	mation, enter cl	nange(s) here:	(Attach additional	sheets, if necessary.)	
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(If an effec <u>Note:</u> If	e date, if other than to tive date is listed, the date if the date inserted in this tell's effective date on the	must be specific and block does not m	cannot be prior to seet the applicabl	date of filing or more the statutory filing req	(optional) nan 90 days after filing.) F juirements, this date w	fursuant to 605,0207 (3)(b) ill not be listed as the
If the record record is filed	specifies a delayed effec d.	rtive date, but not	an effective time	e. at 12:01 a.m. on th	e earlier of: (b) The	90th day after the
O Dated_	etober 29		2021			
		The state of the s	mu	,		
		Signature va n	nember frauthoriz	red representative of a	member	
	Zuryn Dominguez	•				

Filing Fee: \$25.00

Typed or printed name of signee