# KZ1000198507

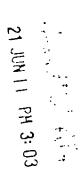
(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #)	
PICK-UP	MAIT [	MAIL
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Statu	s
Special Instructions to Filing Officer:		
	7/13	lai Tm





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#### **COVER LETTER**

TO: Registration Sec Division of Corp			. •
SUBJECT:	D80	CS.LIC	
	Name of Lin	nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspon	idence concerning this matter	r to the following:	
	Da	Mame of Person	uis
	<del></del>	DDCS.LLC Firm/Company	
	7	29 Herbert S	<del>31</del>
	Port	Orange FL 3 City/State and Zip Code	32129
	E-mail address:	S.L. C. dan Gilli (to be used for future annual report noti	Sa Gmail-Com
For further information co	ncerning this matter, please o	call:	
Danniel A. Name of	Gilli S Person	at (386)212 Area CodeDaytim	- 9454 c Telephone Number
Enclosed is a check for the	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 Address: Registration Se		Street Address: Registration Sec	ction
Division of Co		Division of Cor	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT

## ARTICLES OF ORGANIZATION

OF 21 JUN 11 PH 3: 04

(Name of the Limited Lia	bility Company as it now appears on our rida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on $\frac{4}{6}$	
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	imited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AD	DRESS)	
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here	red office address on our records	, enter the name of the new registered
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida strei	
<del></del>	City	, Florida 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

21 JUN 11 PH 3: 04

<u>Title</u>	Name	Address	Type of Action
MGR	Danniel A. Gillis	729 Herbert St. Port Orange, FL 32129	NAdd
			□Remove
			ElChange
			□Remove
		<u> </u>	Change
			□Add
			□Remove
		<del></del>	[]Change
			DAdd
			□ Remove
			🗆 Change
			□Add
		<del></del>	□Remove
			□Change
-			🗆 Add
			□Remove
			□Change

·	21 JUN 11 PH 3: 04
Effective date, if other than the date of filling: f an effective date is listed, the date must be specific and cannot be prior to date of filling or	(optional)
Note: If the date inserted in this block does not meet the applicable statutory file.	more than 90 days after filing.) Pursuant to 605,0207 (, ling requirements, this date will not be listed as the
locument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 12:01 a.m d is filed.	1. on the earlier of: (b) The 90th day after the
Dated June 08 , 202 .  Signature of a member or authorized representation	
<u> </u>	
Sarrier a D.	
Signature of a memori of authorized representati	ve of a member