# Florida Department of State

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To:

Division of Corporations

fax Number : (850)617-6383

From:

Account Name : SG PROJECT MANAGEMENT LLC

Account Number : I20220000151 Phone : (754)226-4414

Pax Number : (954)613~4136

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Pmeil	Address:	
	AUGLOSS:	
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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

### **DSEV HOLDINGS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	DSEV HOLDINGS				
(Name of the Limi	ted Liability Compan (A Florida Limited L	ny as it now appears on our records.) lability Company)		_	
The Articles of Organization for this Limited L Florida document number L21000248323	iability Company	were filed on 05/27/2021		and as	ssigned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited linbi	lity company here:			
The new name must be distinguishable and contain the v	vords "Limited Liabili	ty Company," the designation "LLC" or	the abbrev	iation "[	L.C."
Enter new principal offices address, if applic	able:	701 N FEDERAL HWY - BLDG	1 <b>B</b> - SUIT	ΓE 201	3
(Principal office address MUST BE A STREE	TADDRESS)	HALLANDALE - FL 33009			
Enter new mailing address, if applicable:		10151 SW 3rd ST			<del></del>
(Mailing address MAY BE A POST OFFICE	BOX)	PLANTATION - FL - 33324			
B. If amending the registered agent and/or ragent and/or the new registered office address			name of	the ne	w registered
Name of New Registered Agent:			- <del></del>	1	= 27 = 2
New Registered Office Address:	10151 SW 3rd S	Finter Florida street address	···		<u>1985</u>
	PLANTATION	, Florid	a 33324	÷.	7
		Clty	Z	ip Gode	
New Registered Agent's Standiurs of changing t	Zegistered Agent:				

#### 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.

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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 H 23000411214 3

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			□Change
		<del></del>	□ Add
		-	□Remove
			□Change
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	H23000411214 3		□ Change

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ffectiv	e date, if other than the date of filing:
OLC. II	the date diserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.
ocumen	it's effective date on the Department of State's records.
is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
ated 1	2/01/2023
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	Signature of a member or authorized representative of a member
	, p

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