L21000277684

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COVER LETTER

Divisi	ion of Corpo	rations				
EUDIECT:	Dagny-Chez I	Properties, LLC		4		
SUBJECT: _		Name of Limi	ited Liability Company			
					Filing Fee 23 icate of Status & ied Copy onal copy is enclosed)	
The enclosed A	Articles of An	nendment and fee(s) are sub	mitted for filing.			
Please return a	ll correspond	ence concerning this matter	to the following:			
		Chris Pickering				
			Name of Person	_	-	
			Firm/Company		_	
		6506 NW 56th Lane				
			Address		-	
		Gainesville, FL. 32653				
			City/State and Zip Code		-	
		Chris@paynegrp.com				
		E-mail address: (to be used for future annual report notification)			
For further inf	ormation con	cerning this matter, please co	all:		20	
Chris Pickerii	ng		352 554-0646 at ()			٠.
	Name of P	erson	at ()at ()Area Code Daytime Teleph	one Numbe		h: - 9 :
Enclosed is a	check for the	following amount:			1.	
■ \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	Certifica Certified	iling Fee Natus & d Copy	

Registration Section

TO:

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

Dagny-Chez Properties, LLC			
(<u>Name of the Limited</u> (/	Liability Company as it now appears A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Lia Florida document number L21000277684	bility Company were filed on 6/1	5/2021	and assigned
his amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :	
he new name must be distinguishable and contain the wo	rds "Limited Liability Company," the de	esignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applica	ble:		
Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:		-	
(Mailing address MAY BE A POST OFFICE B	<u></u>		 .
B. If amending the registered agent and/or re agent and/or the new registered office address	 7	ecords, <u>enter the nam</u>	e of the new regist
			2(
Name of New Registered Agent:		<u> </u>	721
•		€	
New Registered Office Address:	Enter Flor	ida street address	<u> </u>
		, Florida <u>/</u>	3 7
	City	, F IOFIUA <u>- </u>	: Zip Pode
New Registered Agent's Signature, if changing Re	egistered Agent:	· ;	23

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Manager	ChrisPickering	6506 NW 56th Lane - Gainesville, FL. 32653	= Add
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			□Change
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te: If the date in	isted, the date must be nserted in this block we date on the Depa	k does not m	ieei the app	licable statu					
ecord specifies a	delayed effective d	,		e time, at 12	:01 a.m. on t	he earlier of:	(b) The 90	Oth day a	fter the
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