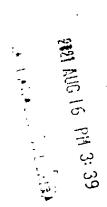
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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Dec & Dec	Enterprises 1, LLC	` ,	
SUBJECT.	Name of Lim	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:	
	Name of Person Area Code Daytime Telephone Number a check for the following amount:		
		Name of Person	
		Firm/Company	
	12285 Colony Preserve Dr	ive	
	Boynton Beach, FL 33444	Address	
		City/State and Zip Code	
	- -		cation)
For further information o			
Danielle Correa			
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

* .

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

Dee & Dee Enterprises 1, LLC		
(Name of the Limited Liabi (A Fiori	lity Company as it now appears on our recorda Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability		and assigned
lorida document number 1.21000354366	 ·	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lin	nited liability company here:	
		72
ne new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		AUG
Principal office address MUST BE A STREET ADD	ORESS)	\$ 5
		P
		့် ယူ
nter new mailing address, if applicable:		39
Aailing address MAY BE A POST OFFICE BOX)		······
	u.	
. If amending the registered agent and/or register		r the name of the new registe
gent and/or the new registered office address here:	:	
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street addre	ess
		lorida
	Cuy	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 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Danielle Correa	12285 Colony Preserve Drive	
		Boynton Beach Fl. 33436	■Remove
			Change
AMBR	Danny Batista	12285 Colony Preserve Drive	□Add
		Boynton Beach Fl. 33436	≣Remove
			Change
MGR	Dee & Dee Holdings, LLC	12285 Colony Preserve Drive	. G≣ Add
		Boynton Beach Fl. 33436	El Remove
			င္သ (E)Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

. If amending any other in			(**************************************	Gatti Onta She	ets, if neces	ssary.)	
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fective date, if other than to the effective date is listed, the date in this It the date inserted in this	he date of filia	8/6/2021 ng:	- d-i CCV		(optional)		
ote: If the date inserted in this cument's effective date on the	block does not Department of	meet the applic State's records.	able statutory fi	r more than 90 day ling requirement	s after filing.] s, this date) Pursuan will not	t to 605.02 he listed
ecord specifies a delayed effect is filed.	tive date, but no	ot an effective ti	me, at 12:01 a.r	n, on the earlier	of: (b) The	e 90th da	y after tl
ted							
	(/					
	Signature of		orized representati				
	THE PROPERTY OF THE	memori of author	anzeu representat:	ve oka member			

Filing Fee: \$25.00