L21000425007

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600374411636

10/08/21--01013--005 **25.00

2021 CCT - 3 PH 2: 20

Michel

OCT 1 9 2021 LALBRITTON

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

			7
SUBJECT: DACHMA	N FAMILY, LLC	•	
Jenote i <u>sitojimi</u>	Name of Lim	nited 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:	
	ARTHUR II. EVANS	Name of Person	
		Name of Cison	
	Saul Ewing Arnstein & Le	ehr IIn	
	344.	Firm/Company	
	161 N. CLARK STREET,		.
		Address	
		1. 74071	
	CHICAGO L	City/State and Zip Code	141-79
	-h-ii h	•	
	christine.brewer@saul.com E-mail address: (to be used for future annual report not	fication)
For further information e	oncerning this matter, please c	all·	
of farmer information o	oncerning and matter, prease c	un.	
SAUL EWING ARNST	EIN & LEHR LLP	at (312) 3128767142	2
Name of Person		Area Code Daytim	e Telephone Number
	e 11 - '		
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		((additional copy is enclosed)
Mailing Address:		Street Address:	
Registration Section		Registration Se	
Division of Corporations		Division of Cor The Centre of T	•
P.O. Box 6327		THE CORRECT I	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DACHMAN FAMILY, LLC	
(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.) ty Company)
The Articles of Organization for this Limited Liability Company were	e filed on Sentember 28, 2021 and assigned
	and assigned
Florida document number <u>L21000425007</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	U21
	
	ت ن
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2:
	20
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	. Florida
	City Zin 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CARY DACHMAN		□Add
		3720 S. Ocean Blvd., Apt. 1101, Highland Beach, F	L Remove
			□Change
MGR	CAREY DACHMAN	3720 S. Ocean Blvd., Apt. 1101, Highland Beach, F.	33487 L [■Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Signature of a member or authorized representative of a member Carey Dachman Typed or printed name of signce

Filing Fee: \$25.00