

L21000442953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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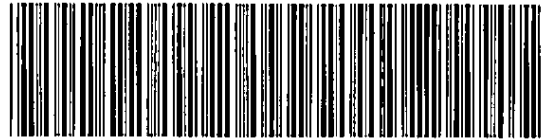
(Business Entity Name)

(Document Number)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

SEP 30 2022  
S. PRATHEP

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DAO Capital Holdings LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following.

Name of Person

REGISTERED AGENTS INC.

Firm/Company

7901 4TH ST N, STE 4000

Address

ST. PETERSBURG, FL 33702

City/State and Zip Code

AGENT@FLORIDAREGISTEREDAGENT.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEMOUR O'CONNOR

Name of Person

at ( 561 ) 377-1288

Area Code

Daytime 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 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**

DAO Capital Holdings LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/11/2021 and assigned  
Florida document number L21000442853

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

MISSDEMOUR BRAND LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7901 4TH ST N STE 4000

ST. PETERSBURG, FL 33702

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

REGISTERED AGENTS INC.

New Registered Office Address:

7901 4TH ST N, STE 300

Enter Florida street address

ST. PETERSBURG

City

Florida 33702

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

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	DEMOUR OCONNOR	66 WEST FLAGLER STREET SUITE 900	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HAVEN CAPITAL HOLDINGS LLC	1309 COFFEEN AVENUE STE 1200	<input checked="" type="checkbox"/> Add
		SHERIDAN, WY 82801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DEMOUR O'CONNOR	7901 4TH ST N STE 4000	<input checked="" type="checkbox"/> Add
		ST. PETERSBURG, FL 33702	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> 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: 01/01/2022 (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.

Dated JULY 18TH, 2022

Demour O'Connor  
Signature of a member or authorized representative of a member:

DEMOUR O'CONNOR  
Typed or printed name of signer

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