# L21000499135

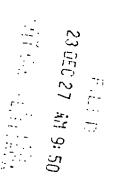
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	J. HORNE	
	JAN 18 2024	}





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12/27/23--01019--026 \*\*25.00





### \*\*\*IMPORTANT NOTICE\*\*\*



PLEASE SEND ALL DOCUMENTS –
APPROVED OR REJECTED TO THE ADDRESS
BELOW.

## INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO:

PHYSICAL: Dept. of State

**Division of Corporations** 

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Tuesday, December 19, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: D&D LOGGING, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

## Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

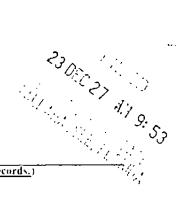
#### **COVER LETTER**

TO:

Registration Section

Division of Corpo	orations		
SUBJECT: <u>D&amp;D LQG</u>	GING LLC		
Separet. <u>Dan coo</u>	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Corpor	ate Maintenance Le	ad
		Name of Person	
	Proc	essing Department	
		Firm Company	
	1	450 Vassar St	
		Address	
		Reno, NV 89502	
		City State and Zip Code	
	E-mail address: (	to be used for future annual report not	fication)
For further information cor	scerning this matter, please co	ill:	
Processir	ng Department	at (800 ) 638-2320	
Name of I	<del></del>	Area Code Daytim	e Telephone Number
Enclosed is a check for the	Call and a sum and		
☑ \$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)
	G ADDRESS:	STREET/COUR	
Division	ion Section of Corporations	Registration Section Division of Corpo	
P.O. Box Tallahas:	: 6327 see, FL 32314	Clifton Building 2661 Executive Co	enter Circle
		Tallahassee, FL 31	

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



#### D&D LOGGING, LLC

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

Florida document number L21000499135  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  DARKWATER EXPLORATION, LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address. if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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;  New Registered Office Address:  Emer Florida wiret address  Emer Florida 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	The Articles of Organization for this Limited Liability Co.	mpany were filed on 11/22/21	and assigned
A. If amending name, enter the new name of the limited liability company here:  DARKWATER EXPLORATION, 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)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  Enter Florida	Florida document number L21000499135	-	
DARKWATER EXPLORATION, LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address MUST BE A STREET ADDRESS)  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:  New Registered Office Address:  Enter Florida street address  Enter Florida Top 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 daties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603, F.S. Or. if this document is	This amendment is submitted to amend the following:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address. if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:   Enter Florida street address     City   Torida     City   Torida	A. If amending name, enter the new name of the limite	ed liability company here:	
Enter new principal office address if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address. if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:	DARKWATER	R EXPLORATION, LLC	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BON)  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:     New Registered Office Address:   Emer Florida street address	The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new mailing address. if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:	Enter new principal offices address, if applicable:		
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:	(Principal office address MUST BE A STREET ADDRE	<u> </u>	
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:			
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:			
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:	Enter new mailing address, if applicable:		
Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida Street address  Florida  City  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	(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida Street address  Florida  City  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			
Enter Florida street address  Florida  City  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	registered agent and/or the new registered office addre		s, enter the name of the new
City 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	New Registered Office Address:		
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		Enter Florida street addre.	N.S.
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			orida
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		•	Zip Code
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	New Registered Agent's Signature, if changing Registered	Agent:	
company has been notified in writing of this change.	provisions of all statutes relative to the proper and cor accept the obligations of my position as registered age being filed to merely reflect a change in the registered	mplete performance of my duties, a ent as provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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	David Last	_12124_Backwind_Dr	□ Add
		Jacksonville, FL 32258	☑ Remove
			Change
		<del></del>	□ Add
			Remove
			Change
		<u>.                                    </u>	<b>D</b> Add
			Remove
			Change
			□ Remove
			☐ Change
	<del></del>		
	<del></del>	☐ Remove	
			☐ Change
			Remove
			☐ Change

		**************************************	
D Ifan	anding any other information	enter change(s) here: (Attach additional sheets (i'necessary)	
12. 11 410	ending may other unormation,	contest change(s) nete. (Macen databonal soccis in accessory)	
			_
			_
			_
			<del></del>
		N1/0	
E. Effec	ctive date, if other than the dat	e of filing: IN/A (optional) specific and control be prior to date of filing or more than 50 days after filing.) Pursuant to	
Sore	around the faile to invited the value failth of	does not meet the applicable statutory filing requirements, this date will not be	histed as the
	ecord specifies a delayed effice 90th day after the record	fective date, but not an effective time, at 12:01 a.m. on the e is filed.	arlier of:
Date	12/19/23	<u> </u>	
	,		
		Palare of a mancher or authorized representative of an annih	_
		entire of a member or authorized representative of a member	
		Darrin Schmidt	
		Exped or printed name of signee	_

Page 3 of 3

Filing Fee: \$25.00

#### **COVER LETTER**

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TO:

Registration Section

Division of Cor	porations		
SUBJECT: <u>D&amp;D_LQ0</u>	GGING, LLC Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	•	
r rease return an ecoresia.	nderice concerning ans mader	to the following.	
	Corpor	ate Maintenance Le	ad
	Proc	essing Department	
		Firm Company	
	1	1450 Vassar St	
	<del></del>	Reno, NV 89502  City State and Zip Code	<del></del>
			<u> </u>
		to be used for future annual report not	fication)
	oncerning this matter, please c	an;	
	ing Department	at (800 ) 638-2320 Daytim	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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)
Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	STREET/COUR! Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 33	on rations enter Circle

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



23 0EC 27 MM 9: 53 (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 11/22/21 and assigned
Florida document number L21000499135
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
DARKWATER EXPLORATION, 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)
Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here:
Name of New Registered Agent:
No. 10 Care 111
New Registered Office Address:  Enter Florida street address
Plantida
, Florida
New Registered Agent's Signature, if changing Registered Agent:
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with th

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
MGR_	David Last	12124 Backwind Dr.	Add
		Jacksonville, FL 32258	✓ Remove
			Change
			Add
			Remove
			Change
			Remove
			□ Change
	<del></del>	<del></del>	
			Remove
		· <u> </u>	Change
		<del> </del>	□ Add
	<del></del>	☐ Remove	
			Change
			Remove
			☐ Change

trame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary)
-	
_	
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-	
-	
-	
-	
-	
-	
-	
Note:	ive date, if other than the date of filing:  N/A  (optional)  extive date is listed the date must be specific and cannot be prior to date of filing or more than 90 days after filing. (Parsuant to 608 0207) 3 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tent's effective date on the Department of State's records
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	12/19/23
	agranuse of a member or authorized representative of a member
	Darrin Schmidt

Page 3 of 3

Filing Fee: \$25.00