

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000394400 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number: I20220000070 Phone : (888)462-3453

: (877)919-2613 Fax Number

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

m 4 3		EFILE1234@INCFILE.COM	
Emall	Address:		



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DIAMOND ELITE PROPERTY MANAGEMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

C. BRUMBLEY

NOV 2 2 2022

Electronic Filing Menu

Corporate Filing Menu

Help

Pege: 2/5 ((((H22000394400 3)))

COVER LETTER

TO: Registration Section Division of Corporations				
PUD IECT.	DIAMOND ELITE PROPE	RTY MANAGEMENT LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Artic	les of Amendment and fec(s) are sub	mitted for filing.		
Please return all co	rrespondence concerning this matter	to the following:		
	LOVETTE DOBSON			
		Name of Person		
		Firm/Company		
	17.350 STATE HWY 249	STE 220		
		Address		
	HOUSTON. TX 77064	ere		
	EFILE1234@INCFILE.CO	City/State and Zip Code		
	E-mail address: (to be used for future annual report notif	ication)	
For further informa	ation concerning this matter, please c	all:		
LOVETTE DOBS	ON	1 888-462-345	33	
1	Jame of Person	at () Area Code Daytime	: Telephone Number	
Enclosed is a check	c for the following amount:			
票 \$25.00 Filing I	Fee S30.00 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)	
Division P.O. Bo	tion Section of Corporations	Street Address: Registration Sec Division of Cory The Centre of T 2415 N. Monroo Tallahassee, FL	porations allahassee e Street, Suite 810	

(((H22000394400 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TE PROPERTY MANAGEMENT		
(Name of the Limited	Liability Company as it now appear V Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Lial Florida document number	oility Company were filed on	01/18/2022	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company he	ere:	
DIAMONDS DOGHOUSE LLC			
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the d	esignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applical	ble:		<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/or regagent and/or the new registered office address Name of New Registered Agent:	gistered office address on our r	ecords, enter the name	A THO
New Registered Office Address:	Enter Els	rida street address	
	1;mt/ 1/10/	an sectamess	
	Cuy	, Florida	Zip Code
New Registered Agent's Signature, if changing Re	,		
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this careful and the company has been notified in writing of this careful and the company has been notified in writing of this careful and the company has been notified in writing of the careful and	agent and agree to act in this a r and complete performance of cred agent as provided for in C egistered office address, I herel	Tmy duties, and I am fo Chapter 605, F.S. Or, i	miliar with and f this document is
	If Changing Registered As	ent, Signature of New Regi	stered Agent

Page: 4/5

(((H22000394400 3)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: (((H22000394400 3)))

MGR =	Manager	
AMBR =	Authorized	Member

<u> Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
			\ \ \ \ _Add
			□Remove
			Change
			□Add
			□Remove
			\piChange
			□Add
			Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change

********				· ·	
					
					
			,,		
-					
• shub-u-u-					
<u></u>					
_				-	

	· 				
		· •-			
Note: If t	date, if other than the dative date is fisted, the date must be the date inserted in this block its effective date on the Depar	does not meet the application	able statutory filing req	(optional) nan 90 days after filing) Purs juirements, this date will i	nant to 605.0207 not be listed as t
record s d is filed.	pecifies a delayed effective da	e, but not an effective ti	me, at 12:01 a.m. on th	e earlier of: (b) The 90th	h day after the
ated	November 18th	2022	·		
	Jarah A	<u>legander</u>	orized representative of a	member	
	51g)	active or a member of digit	arzen representative of a	memori	
	Sarah Alexander				

Filing Fee: \$25.00