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T. MATTHEWS APR -4 2022

COVER LETTER

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TO:

Registration Section

Division of C	Corporations		4
	ONSTRUCTION AND RESTORA	ATION LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	DANNY SINGH		
		Name of Person	·
	DNB CONSTRUCTION A	AND RESTORATION LLC	
		Firm/Company	
	44 ELM ROAD		
		Address	
	OCALA, FLORIDA 3447.	2	
	DANZIG927@GMAIL.CO	City/State and Zip Code	
	-	to be used for future annual report no	tification)
For further informatio	n concerning this matter, please c	all:	
DANNY SINGH		754 368-4004	
Narr	e of Person		me Telephone Number
Enclosed is a check fe	or the following amount:		
= \$25.00 Filing Fee Check # 110		□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Add Registratio		Street Address: Registration S Division of Co	
P.O. Box 6	327	The Centre of	Tallahassee
Tallahasse	e, FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 F 01 F 112: 06

DNB CONSTRUCTION AND RESTORATION 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 we Florida document number <u>L22000101566</u> .	re filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	y company here:	
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)		
_		. Liq
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here: Name of New Registered Agent:	ress on our records, enter the na	me of the new registered
New Registered Office Address:		
New Neglacied Office 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 a provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office adcompany has been notified in writing of this change.	rformance of my duties, and I am vided for in Chapter 605, F.S. Oi	familiar with and r, 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	DANNY SINGH	44 ELM ROAD OCALA. FLORIDA 34472	■Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
	 ,		□Add
			□Remove
			□ Change
			□Add
			□ Remove
		<u>-</u> -	□ Change
·			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

	
-	
 	
Deceation days to other alle	
Note: If the date inserted in	an the date of filing:
the record specifies a delayed elected is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Datud April 18	2022
Dated April 10	
Dated	·

Filing Fee: \$25.00

Typed or printed name of signee