

#6908 P 1

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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2022 JAN 17 AM 11: 2 To: 5 Division of Corporations Fax Number : (850)617-6383 From: Account Name : ALLSTATE CORPORATE SERVICES CORP Account Number : I20040000031 Phone : (800)906-9220 Fax Number : (800)906-9880 \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address: LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DCO MOTORS CG, LLC Certificate of Status 1 Certified Copy 0 Page Count 03 JAN 1 8 2023 Estimated Charge \$30.00 A. LUNT

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2023 J.A

ARTICLES OF AMENDMENT AND FLED TO ARTICLES OF ORGANIZATION 22 JAN 17 AMI OF	121 41  : 27
DCO MOTORS CG, 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 on65/19/2022a Florida document number22000213405	nd assigned

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 Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, it 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 street addro	255
	, F	lorida

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 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

Title	Name	Address	Type of Action
MGRM	DENNIS & CO HOLDINGS LLC	250 N RTE 303, WEST NYACK, NY 10994	🗃 Add
			🗆 Remove
			🗆 Change
MGRM	Frangel Pena	456 TURNEUR AVE, BRONX. NY 10473	🗆 Add
			🖾 Remove
			Change
AMBR	Brian J Dennis	250 N RTE 303, WEST NYACK, NY 10994	🗆 Add
		<b></b>	🖀 Remove
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If the record record is file	specifies a delayed effective d.	date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated	ANUARY 17	2023	·	
	Avi Weiss			
	s	ignature of a member or authorized	representative of a member	
	A VI WEISS			
	<u> </u>	Typed or printed nat	ne of signee	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)