

L22000224114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

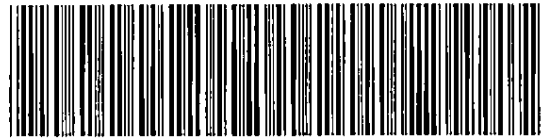
(Business Entity Name)

(Document Number)

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U.S. COURT - 00114--017 \*50.00

5/1/25  
V. 44

FILED  
2023 MAR -1 AM 8:45  
CLERK OF STATE  
JASSEE FL

**STEVEN J. ASARCH, P.A.**

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Steven J. Asarch, J.D., LL.M.

*Board Certified Wills, Trusts and Estates Lawyer*

Admitted in FL and NY

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February 27, 2023

**VIA FEDEX**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

RE: **DIVINE RIGHT ENTERPRISE, LLC - #L22000224114**

Dear Sir/Madam:

The undersigned represents the above-referenced entity. Please find enclosed for filing with the Division of Corporations an Amendment to the Articles of Organization for this entity primarily to change the name of that entity and to change the Registered Agent. My firm's check #6152 in the amount of \$55.00 is enclosed for the filing fee and certified copy. An additional copy of the Amendment is also enclosed.

Please mail the filed certified copy to the undersigned in the self-addressed, stamped envelope provided herein.

Thank you for your assistance and if you should have any questions, please do not hesitate to contact my office.

Sincerely,



Steven J. Asarch  
Attorney at Law

SJA/

Enclosures

cc: Robert H. McBride, w/Encl. (via email)  
Francine Rahe, w/Encl. (via email)

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Divine Right Enterprise, 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:

Steven J. Asarch, Esq.

\_\_\_\_\_  
Name of Person

Steven J. Asarch, P.A.

\_\_\_\_\_  
Firm/Company

20283 State Road 7, Suite 400

\_\_\_\_\_  
Address

Boca Raton, FL 33498

\_\_\_\_\_  
City, State and Zip Code

[sjasarch@trustsandestateslaw.net](mailto:sjasarch@trustsandestateslaw.net)

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

For further information concerning this matter, please call:

Steven J. Asarch

561 995-9991  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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**

Divine Right Enterprise, 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 05/12/2022 and assigned Florida document number 122000224114.

This amendment is submitted to amend the following:

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

Divine Right Enterprises, 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)

928 South Dixie Highway

#1006

Lantana, FL 33462

**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:

Steven J. Asarch, Esq.

New Registered Office Address:

20283 State Road 7, Suite 400

*Enter Florida street address*

Boca Raton


Florida 33498

*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 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

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**

[illegible]

[illegible]

(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**