

L22 000 277 254

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

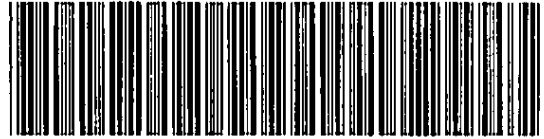
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

623

Office Use Only

mfp



600393728616

09/06/22--01013--015 **25.00

22 DEC 14 AM 4:24

RECEIVED
OFFICE OF THE CLERK
OF THE SUPREME COURT

COVER LETTER

TO: , Registration Section
Division of Corporations

SUBJECT: DK HUFFMAN 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:

DAVID B HUFFMAN

Name of Person

DK HUFFMAN LLC

Firm/Company

8610 PALMER PARK CIRCLE

Address

SARASOTA, FL 34238

City/State and Zip Code

DAVID.HUFFMAN68@GMAIL.COM

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

For further information concerning this matter, please call:

DAVID HUFFMAN

919 369-7656
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

22 DEC 16 AM 4:24



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2022

DAVID B HUFFMAN
8610 PALMER PARK CIRCLE
SARASOTA, FL 34238

SUBJECT: DK HUFFMAN LLC
Ref. Number: L22000277254

We have received your document for DK HUFFMAN LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Michael A Hall
OPS Clerk

Letter Number: 822A00026319

22 DEC 14 AM 4:24

RECEIVED
DIVISION OF CORPORATIONS

DEC 14 2022

Signature on last Page -

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

DK HUFFMAN 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 6/17/2022 and assigned
Florida document number L22000277254.

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 "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)

22 DEC 14 AM 4: 24
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
SARASOTA, FLORIDA

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:

DAVID B HUFFMAN

New Registered Office Address:

8610 PALMER PARK CIRCLE

Enter Florida street address

SARASOTA, FL 34238

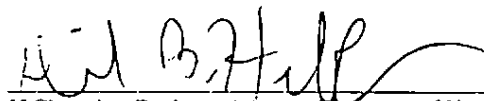
Florida

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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	HUFFMAN, DAVID B	8610 PALMER PARK CIRCLE	<input type="checkbox"/> Add
		SARASOTA, FL 34238	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	HUFFMAN, KHONESAVANH	8610 PALMER PARK CIRCLE	<input type="checkbox"/> Add
		SARASOTA, FL 34238	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

22 DEC 14 AM 4: 24

22 DEC 14 AM 4:24

(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)

Dated 12/9/2022

Wil B. Hulsh

Signature of a member or authorized representative of a member

David B. Huffman

Typed or printed name of signee