

L 22 000 355 837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

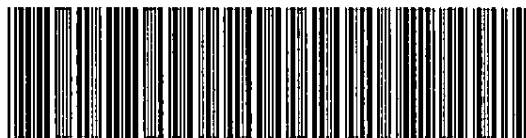
Special Instructions to Filing Officer:

00789, 00623, 00671

00167

still need correcting

Office Use Only



300392769093

08/24/23--01020--001 **25.00

2022 DEC 27 PM 4:28

FILED

A. PUTLER
FEB 15 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D-AI LABORATORY SERVICE'S 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:

DELORIS WILCHER

Name of Person

Firm/Company

1127 NW 1ST AVE

Address

FORT LAUDERDALE , FL 33311

City/State and Zip Code

DELORWILCH@AOL.COM

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

For further information concerning this matter, please call:

DELORIS WILCHER

954
at ()

861-9990

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**

D&A LABORATORY SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 DEC 27 Fri 4:28

The Articles of Organization for this Limited Liability Company were filed on 08/12/2022 and assigned
Florida document number L22000355837

This amendment is submitted to amend the following:

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

D-AI MOBILE LAB SERVICE'S 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)

1127 NW 1ST AVE

FORT LAUDERDALE, FL 33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1127 NW 1ST AVE

FORT LAUDERDALE, FL 33311

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:

Deon's Wilcher

1127 N. W. 1st Ave

Enter Florida street address

Fort Lauderdale, Florida 33311

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>
AMBR	DELORIS WILCHER	1127 NW 1ST AVE FORT LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Add <i>2/15/23 3:54pm</i>
			<input type="checkbox"/> Remove
		1127 NW 1ST AVE FORT LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
AMBR	SAVAIER HILL	3640 NW 108TH DRIVE CORAL SPRINGS, FL 3306	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
AR	ALONZO HILL	3640 NW 108TH DRIVE CORAL SPRINGS, FL 3306	<input checked="" 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

ending any other lines.

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.

Dated 12/22/2022

Signature of a member or authorized representative of a member

Typed or printed name of signee
Doris Wilcher

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 DEC 27 PM 2:16

November 17, 2022

DELORIS WILCHER
1127 NW 1ST AVE
FORT LAUDERDALE, FL 33311

SUBJECT: D&A LABORATORY SERVICES "LLC"
Ref. Number: L22000355837

We have received your document for D&A LABORATORY SERVICES "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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Anissa Butler
Regulatory Specialist II

Letter Number: 122A00025590



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 28, 2022

DELORIS WILCHER
1127 NW 1ST AVE
FORT LAUDERDALE, FL 33311

SUBJECT: D&A LABORATORY SERVICES "LLC"
Ref. Number: L22000355837

We have received your document for D&A LABORATORY SERVICES "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):

YOU HAVE TWO BOXES CHECK FOR YOUR AUTHORIZE PERSON. YOU NEED TO ONLY CHECK ONE BOX.

You failed to make the correction(s) requested in our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Anissa Butler
Regulatory Specialist II

Letter Number: 322A00028858



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 17, 2022

DELORIS WILCHER
1127 NW 1ST AVE
FORT LAUDERDALE, FL 33311

SUBJECT: D&A LABORATORY SERVICES "LLC"
Ref. Number: L22000355837

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Anissa Butler
Regulatory Specialist II

Letter Number: 122A00025590

DEC - 5 2022