L22000512417

	(Requestor's Name)
	(Address)
,	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Duguaga Fatty Nama)
	(Business Entity Name)
	(Document Number)
	()
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

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LC N/C Amend

2022 DEC 15 AMIL: 02

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2022 DET: 16 AM 10: 53

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A. RAMSEY
DEC 16 2022

COVER LETTER

TO: Registration Section Division of Corporation	s ~		•	
SUBJECT: DV5	K Consult	ing and May	KETING	LLC
	Name of Elimited	Chains Company		
The enclosed Articles of Amendm	ent and fee(s) are submit	aed for tiling.		
Please return all correspondence c	oncerning this matter to	the following:		
I	wan v	KOYNEGA Name of Person		
	15K Cons	sulting and h	langemor	of LLC
	3114 Gal	Address Drive	<u> </u>	
	ALLAHAS!	SEE FC 2	32305	
	DISK (M)	be used for future annual report notif	fication)	
For further information concerning	g this matter, please call	:		
Kimbpely Abu Name of Person	Kaliess	at (<u>BS</u>) <u>363</u> . Area Code Daytim	- (326 e Telephone Number	_
Enclosed is a check for the follow	ving amount:			
□ \$25.00 Filing Fee \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	"Status & Dy
<u>Mailing Address:</u> Registration Section Division of Corpora		Street Address: Registration Sc Division of Co	rporations	
P.O. Box 6327		The Centre of	Fallahassee	

2415 N. Monroe Street, Suite 810

Tallahassec, FL 32303

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TLED

2022 DEC 16 AM 11: 02

DVSK Consulting And Marketing 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 12	06 2022 and assigned
Florida document number <u>L22000512417</u>		
A. If amending name, enter the new name of the limited liab	ility company here:	110.
DVSK ConsutING and	Nanage	ment, LL
The new name must be distinguishable and contain the words "Limited Liabi	my company · · · · · ·	
Enter new principal offices address, if applicable:	SAM	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable:	SAM	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our reco	ords, enter the name of the new registered
Name Parintaged Office Address:		
It amending the registered agent and/or registered office address on our records, enter the name of the name of New Registered Agent: New Registered Office Address: Sew C	i street address	
		, Florida
	City	Zip Coae
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e perjormance of the provided for in Ch	apter 605, F.S. Or, if this document is
1f Ch	nanging Registered Age	nt. 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>	Name	Address	Type of Action
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			Il Change
			
			□Remove
			DChange
		·	□Remove
			JChange
			□Remove
			☐ Change
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			70

								
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ted	2/12/20	20	951		a contains of a W	ember		
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Filing Fee: \$25.00