

L23 0000 684 34

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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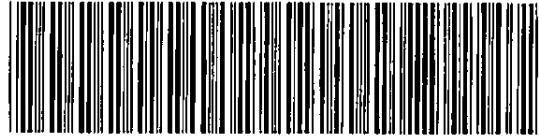
(Business Entity Name)

(Document Number)

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STATE OF MASSACHUSETTS
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2023 APR 18 AM 9:22

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D.A.M. BUILDERZ 2.2.2. 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 Michael Anderson Jr
Name of Person

D.A.M. BUILDERZ 2.2.2, LLC
Firm/Company

3676 ST. RD, 44
Address

New Smyrna Beach FL 32168
City/State and Zip Code

Dam builderz 031970@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David M Anderson Jr at (386) 307-3700
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

2023 APR 18 AM 9:22
TALLAHASSEE, FL

D.A.M. BUILDER 2.2.2, LLC

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	David M Anderson	3176 State Road 44	<input checked="" type="checkbox"/> Add
		New Smyrna Beach	<input type="checkbox"/> Remove
		Florida 32168	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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Stamp: 20 APR 18 9:22 AM, TALLAHASSEE, FL

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

2023 APR 18 AM 9:22
ST. LOUIS STATE
TALLANTZ, EPH

E. Effective date, if other than the date of filing: 2 6 23 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

4-18-23

Paula OK

Signature of a member or authorized representative of a member

David M Anderson JR

Typed or printed name of signee