L23000154053

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COVER LETTER

Registration Section Ю: Division of Corporations

ИВЛЕСТ:	Name of Lim	ited Liability Company	
he enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
lease return all correspo	ondence concerning this matter t	to the following:	
	Irina Prell-Spearing		
		Name of Person	
	Prell-Spearing Law Firm		
		Firm/Company	
	3729 Chiquita Blvd. S.		
		Address	
	Cape Coral, FL 33914		
		City/State and Zip Code	
	irina@spearinglaw.com		
	E-mail address: (to be used for future annual report notif	ication)
or further information c	oncerning this matter, please ca	II:	
rina Prell-Spearing, Esquire		239 231-2222 at ()	
Name o	î Person	at () Area Code — Daytime	: Telephone Number
nclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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&E RE INVESTMENT HELLC (Name of the Limited Liability Company as it now appears on our records,) (A Florida Limited Liability Company) he Articles of Organization for this Limited Liability Company were filed on $\frac{03/27/2023}{}$ and assigned lorida document number 1,23000154053 his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: te new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) . If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ecept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

`amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u>
<u>r_removed from our_records</u>:

IGR = Manager MBR = Authorized Member

Name	Address	Type of Action
The Dotsenko Family Revocable Trust of August 29, 2023	120 Burnt Pine Drive, Naples, FL 34119	•Add
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	The Dotsenko Family Revocable Trust	The Dotsenko Family Revocable Trust of August 29, 2023 120 Burnt Pine Drive, Naples, FL 34119

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ctive date, if other than the	date of filing:	(optional)	Pursuant to 605 020
e: If the date inserted in this blo	ock does not meet the applicable statutory f	filing requirements, this date w	ill not be listed as
ament's effective date on the De	spartment of State's records.		
cord specifies a delayed effectiv s filed.	e date, but not an effective time, at 12:01 a.	.m. on the earlier of: (b) The 9	00th day after the
September 6	2023		
ed Eugene Dotsenko	<u>)</u>		
Eugene Dotsenka (Sep 6, 2023-13-01-ED)	···		