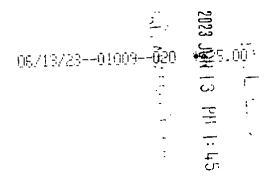


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	DND PARK	S ENTERPRI	SE LLC
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Denard	Parks Name of Person	
	DND PA	Firm/Company	RISE HC
	9949 NW 9	Address	
	Plantatio	FL 3332	14
	Sir Parks 1 E-mail address: (Jamail - com	iffication)
For further information co	oncerning this matter, please ca		
Denard &	Person	at (<u>954</u>) <u>243</u> Area Code Daytir	ne Telephone Number
Enclosed is a check for th	e following amount:		
₩ S25.00 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 S Division of C P.O. Box 632	section orporations	Street Address: Registration Se Division of Co The Centre of	orporations
Tallahassee, F			oc Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT . TO ARTICLES OF ORGANIZATION OF

DNDPARKS ENTERPRISE LLC PK 1:45

The Articles of Organization for this Limited Liability Company were filed on Jone 5,2023 and assigned Florida document number 423000 270161.

This amendment is submitted to amend the following:

Α.	If amending	g name, g	enter	the new	name	of the	limited	liability	company	<u>here</u>
----	-------------	-----------	-------	---------	------	--------	---------	-----------	---------	-------------

DPARKS	FITNESS LLC
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9949 NW 9th C+
(Principal office address MUST BE A STREET ADDRESS)	Plantation, FL 33324
	·
Enter new mailing address, if applicable:	9949 NW 9th ct
(Mailing address MAY BE A POST OFFICE BOX)	Plantation, FL 33324

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registere</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:	d Agent: Denard Yarks		
New Registered Office Address:	9949 NW 9+	thct	
	Enter Flori	da street address	
	Plantation	_ Florida 333344	
	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 addec or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Natasha Parks	9949 NW 9th C+ Plantation FL 3	3394 □Add
			PRemove
		 	□Change
			□Add
		·	□Remove
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Page 2 of 3

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Faatia	e date, if other than the date of filing:(optional)
n effect i <u>te:</u> - If	tive 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a it's effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
ted _	June 12 . 2023.
	June 12 2023.
	Signature of a member or authorized representative of a member
	Denard Parks Typed or printed name of signee
	I 12/10 - A - A - A - I - A - A - A - A - A - A

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Filing Fee: \$25.00