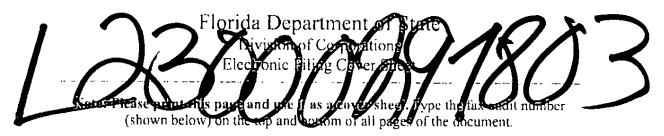
9/1/23, 10:47 AM

Division of Corporations



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN D. G. DASS LLC

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COVER LETTER

TO:	Registration Se Division of Cor			·		
SURIE		D. G. DASS ELC				
.50.19042	•	Name of Limited Liability Company				
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please i	etum all correspo	ondence concerning this matter	to the following:			
		Cheyenne Moseley				
			Name of Person			
		Legalzoom.com, Inc.				
			Firm'Company			
		101 N Brand Blvd 11th Fl				
			Address	· · · · · · · · · · · · · · · · · · ·		
	Glendate, CA 91203 City/State and Zip Code Alexmarieduffy@gmail.com					
			to be used for future annual report north	ication)		
For furt	her information c	oncerning this matter, please c	all:			
Cheyen	ne Moseley		800 773-0888			
	Name o	f Person	at () Area Cosle — Daytime	Telephone Number		
Enclose	d is a check for th	he following amount:				
□ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed:	☐ \$69.00 Filing Fee. Certificate of Status & Certified Copy raddmonal copy is enclosed)		
MAILING ADDRESS: Registration Section			STREET/COURING Registration Section			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301 To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D. G. DASS 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 06/20/2023 __ and assigned Florida document number 1.23000297803 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: D.G.H. Dass LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:

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 familian with and accept the obligations of my position as registered agent as provided for in Chapter 695, F.S. Or, if this document is being filed to merely reflect a change in the registered office oddress. I hereby confirm that the limited hability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Tater Elorida street address

MGR = Manager

Τo

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person-being added or removed from our records:</u>

AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action	
			☐ Remove	
			Change	
			☐ Remove	
			☐ (Thange	
		<u></u>		
			□ Remove	
			☐ Change	
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			☐ Change	
			☐ Add	
			☐ Remove	
			□ Change	
			Add	
			□ Remove	
			☐ Change	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing:
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 Author 14th 2003 Signature of a pember of authorizing representative of a member
Alexandra Duffy
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00