## L23000362881

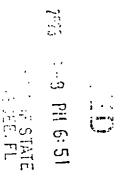
(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:
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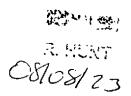




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## **COVER LETTER**

Tallahassee, FL 32314

TO: Registration S Division of Co					
	ldings, LLC.				
SUBJECT:	Name of Lim	ited Liability Company		<del></del>	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
	pondence concerning this matter	_			
	Morgan Rauth				
		Name of Person			
	DMC Holdings, LLC.				
		Firm/Company		<del></del>	
	3190 Windward Lane				
		Address	-		11.1 13.1
	Lake Worth, FL 33462			:	: :
		City/State and Zip Code	:	<del></del>	1
	dmccapitalpartners@gmail.				යා 
	E-mail address: (	to be used for future annua	report notification)	τυ (γ) (τυ , γ) (γ) (γ)	PH 6
For further information	concerning this matter, please c	all:		. PA	PH 6: 5
Morgan Rauth			18-4821	ָ רַיַּז	
Name	of Person	at () Area Code	Daytime Telephon	e 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 en	nclosed)	660.00 Filing Fee Certificate of Sta Certified Copy (additional copy is er	itus &
Mailing Addr			Address:		
Registration	i Section Corporations	<del>-</del>	ration Section on of Corporation	\$	
P.O. Box 63			entre of Tallahass		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DMC Holdings, LLC.			
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on o iited Liability Company)	ur records.)	<del></del>
The Articles of Organization for this Limited Liability Com	pany were filed on August 1	. 2023	and assigned
Florida document number L23000362881			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
DMC Capital Partners, LLC.			
The new name must be distinguishable and contain the words "Limited	Liability Company," the designa	tion "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	S)		
			ن * د د :
Enter new mailing address, if applicable:			, 1
(Mailing address MAY BE A POST OFFICE BOX)			
		in .	<del>=</del> [;
		-n-	
B. If amending the registered agent and/or registered of	fice address on our record	ls, enter the name	
agent and/or the new registered office address here:			
Name of New Registered Agent:	<del></del>	<del></del>	
New Registered Office Address:			
	Enter Florida str	eet address	
		, Florida	2:. C. J.
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent's			
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agen being filed to merely reflect a change in the registered of company has been notified in writing of this change.	plete performance of my d t as provided for in Chapt	luties, and I am fai ter 605, F.S. Or. if	niliar with and this document is

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>	Address	Type of Action
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ective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9  e: If the date inserted in this block does not meet the applicable statutory filing require ument's effective date on the Department of State's records.		Pursuant to	
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the eal is filed.	arlier of: (b) The	90th day	after the
ated 08   03   20 a 3			

Filing Fee: \$25.00