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PICK-UP	WAIT	MAIL
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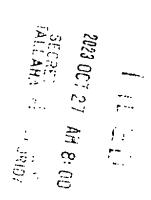
Office Use Only

A. RIVERS NOV 7 2023



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COVER LETTER

SUBJECT:	Name of Limite	d Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subm	itted for filing.	
Please return all correspon	ndence concerning this matter to	the following:	
	Taylor Newman	<u>-</u>	
		Name of Person	
	Northwest Registered Agent	, LLC	
		Firm Company	
	7901 4th Street N. Suite 300	0	
		Address	
	St. Petersburg, FL 33702		
		City/State and Zip Code	
	support@northwestregistered		
	E-mail address: (to	be used for future annual report notificati	on)
For further information c	oncerning this matter, please cal	II:	
Angie Damouni		813 697=7999 at ()	
Name o	f Person	Area Code Daytime Te	lephone Number
Enclosed is a check for t	he 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
		(and the copy is circums)	(additional copy is enclosed

Registration Section Division of Corporations

TO:

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

DMN Strategies		_	
(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	and a	assigne	d
Florida document number L23000432380			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	abbreviation	"L.L.C.	
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)		<u> </u>	
Withing address MAT BEAT OUT OF THEM BOTS		<u>.</u>	
B. If amending the registered agent and/or registered office address on our records, enter the na	me of the	newre	gistered
agent and/or the new registered office address here:	: ح <u>د</u>	30	-7 .
	₩ ₩,	2.1	**************************************
Name of New Registered Agent:			
New Registered Office Address: Enter Florida street address		<u>}</u>	<u> </u>
	JAC V	ن ن	`•
, Florida _	Zip Co		
	22.7		

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Angie Damouni	26246 WESLEY CHAPEL BLVD.	= Add
		Suite 126	□Remove
		Tampa. FL 33559	Change
			⊟Remove
			□Change
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ffective date, if other than the frective date is listed, the date in this.	ust be snecific an	id cannot be pri	or to date of filing	or more than 90	(optional days after filing	g.) Pursuant to 605.02
Note: If the date inserted in this locument's effective date on the	Department of	State's record	S.	Tinig requires	remove many successive	
record specifies a delayed effect d is filed.	ive date, but no	n an effective	time, at 12:01 i	i.m. on the ear	ier of: (b) T	he 90th day after t
October 9th		2023				
			•			
l	/ qui		horized represen			

Filing Fee: \$25.00