

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2-3
(Document Number)
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Special Instructions to Filing Officer:





01/10/24--01025--007 **25.00



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D Merchant Investing, LLC				
(Name of the Limit	ed Liability Comp (A Florida Limited	nny as It now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited L Florida document number L23000485160	iability Compan	y were filed on $\frac{10/23}{}$	2023	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited lia	bility company here:		
-				
The new name must be distinguishable and contain the v	vords "Limited List	bility Company," the desig	nation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	<u>. </u>		
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	<u> </u>		<u> </u>
				<u>-</u>
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ss here:	e address on our reco	rds, <u>enter the na</u>	ame of the new registered
Name of New Registered Agent:	*			
New Registered Office Address:	1808 Woodha		street address	
	Sarasota		, Florida	34232
		City	, r lot tag	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

COVER LETTER

	ision of Corp		•	
		Investing, LLC		• .
SUBJECT:		Name of Limi	ted Liability Company	
		Amendment and fee(s) are sub-		
		Kimberly Driskell		
			Name of Person	
			Firm/Company	
		351 W Washington St		
			Address	
		Kearney, MO 64060	City/State and Zip Code	
		kdriskell@paradigmdirect.c	com	
Eas Swebse	information c	E-mail address: (oncerning this matter, please of		dification)
Kimberly I		Oracetting and tracter, process w	816 298-8981	
		f Person	at ()	me Telephone Number
Enclosed is	a check for the	ne following amount:		
≣ \$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addre		<u>Street Address:</u> Registration S	ection
D	ivision of C	Corporations	Division of Co	orporations
• .	O. Box 632		The Centre of	-
Ta	allahassee, l	FL 32314	2413 N. MONI	oe Street, Suite 810

Tallahassee, FL 32303

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	Dianne Grant	1808 Woodhaven CIR	□ Add
	.	Sarasota, FL 34232	□Remove
			≘ Change
			□ Remove
			☐ Change
			Remove.
			Change
			CRemove
			Change
			DAdd
			□ Remove
			□ Change
			CJA4d
			Change.

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	11/11/00/0	•		*
Mective date, if other than the date must be	te of filing:		(optional)	
Note: If the date inserted in this block	does not meet the appli	icable statutory filing n	equirements, this date will	not be listed as the
focument's effective date on the Depa	rtment of State's record	S.		: (
record specifies a delayed effective d d is filed.	ste, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 90	th day after the
Dated November 11th	2023	·		
Deann &	rent			
Sig	maturé of a member or aut	horized representative of	a member	

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Filing Fee: \$25.00