

L23000548441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

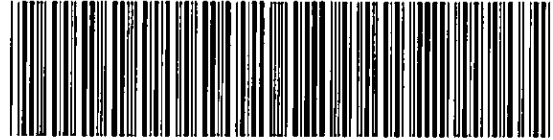
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK
TALLAHASSEE, FL

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P.O. Box 8127
Chattanooga, Tennessee 37414

Telephone (423) 529-5290
Facsimile (800) 874-0680
amber@lpafirm.com

January 9, 2024

Florida Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Via Overnight UPS

**Re: Articles of Amendment
DAY SIX PROPERTIES, LLC
L23000548441**

Dear Sir/Madam,

Enclosed please find Articles of Amendment completed for the above-mentioned entity. These articles are being filed to update the authorization of the member, Matthew Richman, from AMBR to MMBR. Also enclosed please find a check in the amount of \$55.00 for the filing fee & certified copy. I have also enclosed a self-addressed stamped envelope for the return of the filing acknowledgment.

Your time in this matter is greatly appreciated. Please contact me if there are any questions or concerns.

Best regards,

Amber McGhee
Paralegal

Enclosure:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Day Six Properties, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark W. Litchford
Name of Person

Litchford, Pearce's Associates
Firm/Company

P.O. Box 8127
Address

Chattanooga, TN 37414
City/State and Zip Code

mark@lpa-firm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Litchford at (423) 529-5290
Name of Person Area Code Daytime Telephone 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 enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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STATE
TALLAHASSEE, FL

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DAY SIX PROPERTIES, 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 December 12, 2023 and assigned Florida document number L23000548441.

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)

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:

Enter Florida street address

Florida

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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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AMBR	Matthew Richman		
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			<input type="checkbox"/> Remove
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		5470 E. Busch Blvd 430	<input checked="" type="checkbox"/> Change
		Temple Terrace, FL 33617	

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2021 JAN 11 PM 1:33
CLERK OF DISTRICT COURT
STATE OF FLORIDA

FILED

2024 JAN 11
12:12

(If an effective 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 605.6207 (3)(b)

Dated January 9 . 2024

Signature of a member or authorized representative

Managing Member