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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

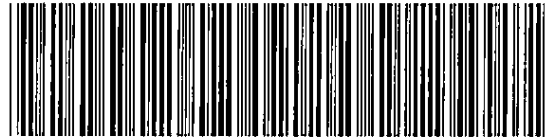
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/06/24--01012--020 \*\*35.00

24 JUN -6 AM 5:49

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DSW Management Enterprises 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:

Wanda M. Henderson  
Name of Person

DSW Management Enterprises LLC  
Firm/Company

11871 Brighton Knoll Loop  
Address

Riverview, FL 33579-2143  
City/State and Zip Code

whenderson19@verizon.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Fleming at 813 516-8271 (813-516-8271)  
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

DSW Management Enterprises LLC

**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	Darryl J. Henderson	11871 Brighton Knoll Loop	<input type="checkbox"/> Add
		Riverview, FL 33579	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change

AMBR	Chrisonna J. Chester	11871 Brighton Knoll Loop	<input type="checkbox"/> Add
		Riverview, FL 33579	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change

			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please change the title of Wanda M. Henderson  
from mgr to owner.

Wanda M. Henderson - owner

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 6/4/24

Wanda M. Henderson  
Signature of a member or authorized representative of a member

Wanda M. Henderson  
Typed or printed name of signee