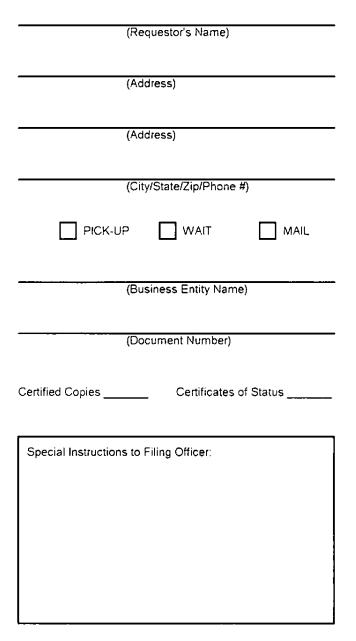
## L24 000 136 062

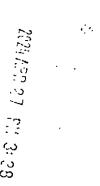


Office Use Only



500427007035

04/03/24--01012--009 \*\*30.00



## **COVER LETTER**

TO:

Tallahassee, FL 32314

	Registration Section Division of Corporations						
	D \$ D TAX MULTISERVICES LLC  Name of Limited Liability Company						
SUBJECT:							
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		DAVID NICOLSON DET	ERVIL				
	Name of Person						
		D \$ D TAX MULTISERVICES LLC					
		Finn/Company 200 VIA LUGANO CIRCLE Address					
		BOYNTON BEACH / FLORIDA / 33436					
	City/State and Zip Code						
		DETERVILDAVIDNICOL	•				
		E-mail address; (	to be used for future annual report not	ification)			
For further in	formation c	oncerning this matter, please ca	all:				
DAVID NIC	OLSON DE	TERVIL	561 512-0806				
	Name o	f Person	Area Code Daytir	ne Telephone Number			
Enclosed is a	check for th	ne following amount:					
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	ling Addres		Street Address: Registration So	ection			
Div	ision of C	orporations	Division of Co	rporations			
P.C	<ol> <li>Box 632</li> </ol>	.7	The Centre of	Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D \$ D TAX MULTISERVICES LLC	
( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)
he Articles of Organization for this Limited Liability Company w	ere filed on MARCH 19 and assigned
lorida document number L24000136062	
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liabili	ty company here:
) & D TAX MULTISERVICES LLC	
he 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:	29
Principal office address MUST BE A STREET ADDRESS)	
	; <del>5</del>
	7
Enter new mailing address, if applicable:	- <del>0</del>
Mailing address MAY BE A POST OFFICE BOX)	ယ္
	 8
3. If amending the registered agent and/or registered office adegent and/or the new registered office address here:	dress on our records, <u>enter the name of the new regis</u> t
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 = Mar AMBR = Aut	nager horized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			🗆 Add
			Remove
			Change
			□Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			[] Change
			🗆 Add
			□Remove
			□Change

\_\_\_\_\_ □Add

\_\_\_\_\_ □Change

-	
_	
-	
-	
-	
Effec	tive date if other than the fire and
(If an e	tive date, if other than the date of filing:  [flective 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 605.02  [If the date inserted in this block does not meet the applicable stantory filing requirements this days after filing.)
docu	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.
-	seem 3 effective date on the Department of State's records.
If the rec	ford energifies a delayed official and a second official and a sec
record is	cord 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
Date	Manch 21 202W.
	, delsay
	Child Van Mi
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00