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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

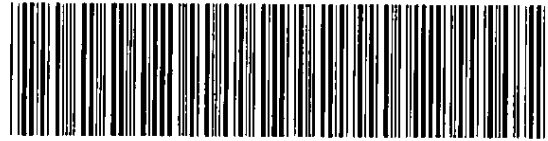
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 SEP -5 PM 2:12
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DMR 4609 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:

ODALYS OLIVA

Name of Person

TAX CAPITAL GROUP

Firm/Company

250 CATALONIA AVE SUITE 701 A

Address

CORAL GABLES, FLORIDA 33134

City/State and Zip Code

INFO@TAXCAPITALGP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ODALYS OLIVA

Name of Person
at (_____) 305-589-4023
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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>
MGR	DMR EXPERT CONSULTING IN	13892 PINE LODGE LN	<input type="checkbox"/> Add
		FORT MYERS, FL 33913	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DMR DEVELOPERS LLC	13892 PINE LODGE LN	<input checked="" type="checkbox"/> Add
		FORT MYERS, FL 33913	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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N/A

[illegible]

(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)

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 JUNE 13, 2024

David Noz
Signature of a member or authorized representative of a member

DANILO ROGERS

Typed or printed name of signee