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COVER LETTER _

	gistration Sect isi o n of Corpe			
SUBJECT.	DB Premier I	loldings LLC		
SUBJECT:		Name of Limi	ited Liability Company	
The enclosed	l Articles of A	mendment and fee(s) are subi	nitted for filing.	
Please return	all correspond	dence concerning this matter	to the following:	
		Aubrey Birrell		
			Name of Person	
		Prime Corporate Services		
			Firm/Company	<u></u>
		5250 S Commerce Dr Ste 2	200	
			Address	····
		Murray, UT 84107		
			City/State and Zip Code	
		llcsupport@primecorporates		-(45)
For further in	nformation con	cerning this matter, please ca	o be used for future annual report no ll:	otilication)
Aubrey Birr			855 577-4639 at ()	
	Name of P	erson	Area Code Dayti	ime Telephone Number
Enclosed is a	check for the	following amount:		
□ \$25.00 F	iling 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)

STREET/COURIER ADDRESS:

2661 Executive Center Circle

Registration Section Division of Corporations Clifton Building

MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DB Premier Holdings LLC				
(<u>Name of the Limited Liab</u> (A Flori	ility Compan da Limited Li	y as it now appears on lability Company)	our records.)	
he Articles of Organization for this Limited Liability	Company v	were filed on L24000	0212896	and assigned
lorida document number 5/7/24	·			
his amendment is submitted to amend the following:				
a. If amending name, enter the new name of the lin	mited liabil	lity company here:		
he new name must be distinguishable and contain the words "L	imited Liabili	ty Company," the design	nation "LLC" or the ab	breviation "L.L.C."
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		4313 Florida Avenue South #1031		
		Lakeland FL 33813		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		4313 Florida Avenu Lakeland FL 33813	e South #1031	
B. If amending the registered agent and/or reg egistered agent and/or the new registered office ad Name of New Registered Agent:			r records, <u>enter</u>	the name of the
New Registered Office Address: 431.	3 Florida Av	enue South #1031		
		Enter Florida s	treet address	
Lak	eland		, Florida	813
		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 RegisteredrAgent

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	Dustin C Bozeman	4313 Florida Avenue South #1031	
		Lakeland FL 33813	
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Effective date, if other t fan effective date is listed, the Note: If the date inserted document's effective date.	than the date of fi e date must be specific in this block does n on the Department	not meet the applical	o date of filing or more ble statutory filing r	(option) than 90 days after fil equirements, this d	al) ing.) Pursuant to 605.0207 ate will not be listed as
deament's circuive date					
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Filing Fee: \$25.00