

L24000385609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

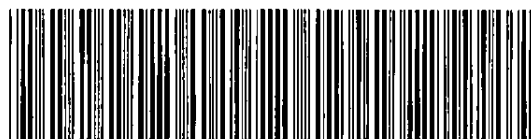
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000436973410

23.19/24-01.60-001 **25.00

2024 SEP 24 AM 9:17
SECRETARY OF STATE
TAL LARSEN, REG. SEC.

Sandra Brady
211 Dogwood Road
Searingtown, NY 11576
917.670.4246
Bradys211@optonline.net

September 12, 2024

Via Regular Mail Only:

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: **Articles of Amendment to Articles of Organization of DM-AM11, LLC**
LLC: DM-AM11, LLC
Filed: September 3, 2024
FI Document No.: L24000385609

Dear Sir/Madam:

Attached please find the Articles of Amendment to Articles of Organization of DM-AM11, LLC and a draft for \$25.

The sole amendment is to correct the spelling of the AMBR's last name to reflect the correct spelling which is "Milevoj".

I can be reached at 917.670.4246 (bradys211@optonline.net) a personal mailing address of 211 Dogwood Road, Searingtown, NY 11576, or the LLC's address of 512 67th Street, Holmes Beach, FL 34227.

Thank you for your assistance.

Very Truly Yours.

Sandra Brady

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DM-AMH, 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:

Sandra Brady

Name of Person

Firm/Company

512 67TH STREET

Address

HOLMES BEACH, FL 34227

City/State and Zip Code

bradys211@optonline.net

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

2021 SEP 24 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Sandra Brady

917 670-4246

at ()

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

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

DM-AM11, 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 September 3, 2024 and assigned
Florida document number L24000385609.

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>
AMBR	Dino Milevoj	512 67th Street	<input type="checkbox"/> Add
		Holmes Beach, FL 34227	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2014 SEP 24 10:17 AM
SECRETARY OF STATE
TALLAHASSEE, FL

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2024 SEP 24 PM 9:17
SECRETARY OF DEFENSE
TALLAHASSEE, FL

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 September 11, 2024

September 11



Signature of a member or authorized representative of a member

Dino Milevoj

Typed or printed name of signee