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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name :

Account Number : 120090000081

Phone

Fax Number : (813)436-5206

**Enter the email address for this business entity to be used for future—
annual report mailings. Enter only one email address please: ** annual report mailings. Enter only one email address please **

Email:	Address:			
CIRCLE	Auuress.			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DANNYGOLD LLC

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Corporate Filing Menu

T. LEMIEUX Help JUL 28 2025

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DANNYGOLD LLC	>		
(Name of the Limited Liability C (A Florida Lia	Company as it now appears on our recomited Liability Company)	<u>rds.</u>)	
The Articles of Organization for this Limited Liability Com	npany were filed on 09/16/24	and assigned	
Florida document number L24000402086			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
Dannygold PLLC			
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LI	C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	SS)		
		025	
Enter new mailing address, if applicable:			
•		. N	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>ente</u>	er the name of the new registered	
agent and or the new registered office address here.		, , ,	
N			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addr	ens	
	, 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.

Jul 25, 2025 08.27 / To: +18506176383 Page: 3/4 Fax: 18134365.

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>	Address	Type of Action
			
			□Remove
			□Change
			□Add
			©Remove
			Change
			□Remove
			□ Change
			□ Add
			□Remove
			□Change
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ffective date, if other than the an effective date is listed, the date mustote: If the date inserted in this blocument's effective date on the Do	t be specific and can ock does not meet	mot be prior t the applica				
record specifies a delayed effective Lis filed.	date, but not an	effective tir	ne, at 12:01 a	i.m. on the ear	ier of: (b) Th	e 90th day after the
ated June 20th		025	<u> </u>			
	N	VT SI	MAN			
· · · · ·	Signature of a mem	iber or autho	rized represent	ative of a memb	er	

Filing Fee: \$25.00