L21000258458

(Requestor's Name)				
(Ad	dress)	<u> </u>		
,	,			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
				
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			





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COVER LETTER

TO: Registration S Division of Co			4
	ibution LLC		
SUBJECT:	Name of Lim	nited Liability Company	
		the first state of	
	Amendment and fee(s) are sub		
Please return all corresp	ondence concerning this matter	to the following:	
	Hussein Rakine		
		Name of Person	
	Dash Distribution LLC		
		Firm Company	
	21050 Sheridan St		
		Address	
	Pembroke Pines FL 33028		
		City/State and Zip Code	2023 SEP SFURET
	lisagoblepa@gmail.com		SEP SEP
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	26 - 1
Lisa Goble		954 446-3175	
Name	of Person	Area Code Daytir	ne Telephone Number 🚊 👿
Enclosed is a check for t	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)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Sc	ection
Division of Corporations		Division of Co	rporations
P.O. Box 63. Tallahassee,		The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DASH DISTRIBUTION LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 06/03/2021	and assigned
Florida document number L21000258458		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		- 15 20 20 E
		7 7
Enter new mailing address, if applicable:	: -	
Mailing address MAY BE A POST OFFICE BOX)		
Thing hands out to be to		1
	1.	. 9
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, <u>enter the</u>	name of the new regi
Name of New Registered Agent:		
Many Panietarad Office Address		
New Registered Office Address:	Enter Florida street address	·
	, Floric	la
	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 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
AMBR	BARROSO, ARBELIO	6278 N Federal HWY #610	□ Add
		FORT LAUDERDALE, FL 33308	■Remove
			SEC 2023 SEP 28 Change
			□Change
			□Add
		·	□Remove
			□ Change
			□Add
		□Remove	
		☐ Change	
			□Remove
			□Change

Typed or printed name of signee