40000045051

| (Requestor's Name) |
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| (Address) |
| (Address) |
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T. CLINE

MAY - 5 2010

EXAMINER

COVER LETTER

| TO: Registration S Division of Co | | | | |
|-----------------------------------|---|---|------------------------|----------------|
| SUBJECT: | Та | enty's LLC | | |
| | Name of Lim | ited Liability Company | | |
| The enclosed Articles of | of Amendment and fee(s) are su | bmitted for filing. | | |
| Please return all corresp | pondence concerning this matte | r to the following: | | |
| | | Manuel J Vadillo | | |
| | | Name of Person | | |
| | | Torres & Vadillo LLP | | |
| | | Firm/Company | | |
| | 11402 | NW 41st Street, Suite 2 | 202 | |
| | | Address | | 2010 HAY -1 |
| | Miami, Florida 33178 | | | |
| | | City/State and Zip Code | | |
| | Mjvad E-mail address: (| dillo@torresvadillollp.com to be used for future annual report | notification) | AY -4 AY |
| For further information | concerning this matter, please | call: | | AN H: 17 |
| Ma | anuel J Vadillo | at (305) | 485-9700 | Ðm → |
| Name | of Person | | ytime 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 encl | osed) Certified | te of Status & |
| Regis Divis | LING ADDRESS: stration Section sion of Corporations Box 6327 | STREET/CO Registration So Division of Co Clifton Buildin | orporations | |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | Tanty's LLC | | |
|---|---|-----------------------------|--|
| (<u>Name of the Limited Li</u> (A FI | ability Company as it now appeorida Limited Liability Company | ears on our records.) | |
| The Articles of Organization for this Limited Liab | 4/27/2010 | and assigned | |
| Florida document number L1000004509 | 51 | | |
| This amendment is submitted to amend the follow | ing: | | |
| A. If amending name, enter the new name of th | e limited liability company h | ere: | |
| | Dalufelix LLC | | |
| The new name must be distinguishable and end with to "L.L.C." | he words "Limited Liability Com | pany," the designation "l | LLC" or the abbreviation |
| Enter new principal offices address, if applicab | le: <u>N/A</u> | _ | 7,0 23 |
| (Principal office address MUST BE A STREET A | ADDRESS) | | |
| | | | Ace 2 |
| | | | SSE 4 |
| Enter new mailing address, if applicable: | | | T9 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 |
| Mailing address MAY BE A POST OFFICE BO | <u></u> | | |
| | | | 5m ep |
| B. If amending the registered agent and/or registered agent and/or the new registered offic | | our records, <u>enter t</u> | the name of the new |
| Name of New Registered Agent: | N/A | | |
| New Registered Office Address: | | | |
| • | 1 | Enter Florida street ada | lress |
| | | , 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR [≚] Manager

MGRM = Managing Member **Title** Name **Address** Type of Action N/A ☐ Add Remove ☐ Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A Dated _____ April 30th 2010 Signature of a member or authorized representative of a member Manuel J Vadillo Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00