## US00036876

| (Requestor's Name)                      |  |  |  |  |  |
|---|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (0.00.0000 = 0.0, 0.000)                |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer; |  |  |  |  |  |
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Office Use Only



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## **COVER LETTER**

|   | tegistration Sec<br>division of Corp |   |   |   |                                |
|---|--------------------------------------|---|---|---|--------------------------------|
| SUBJECT                                     |                                      | VENTURES, LLC                                   |   |   |                                |
| SUBJECT                                     |                                      | Name of Lir                                     |   |   |                                |
| The enclos                                  | sed Articles of A                    | mendment and fee(s) are sul                     | omitted for filing.   |   |                                |
| Please retu                                 | ırn all correspon                    | dence concerning this matter                    | to the following:   |   |                                |
|   |                                      | MARTIN BUBLEY                                   |   |   |                                |
|   |                                      | <del></del>                                     | Name of Person  | <del></del>   |                                |
|   |                                      | BUBLEY & BUBLEY, P                              |   |   |                                |
|   |                                      |   |   | ~3  |                                |
|   |                                      | 12960 N. DALE MABRY HIGHWAY                     |   |   | 1024                           |
|   |                                      | <del></del>                                     |   |   |                                |
|   |                                      |   | 25  |   |                                |
| City/State and Zip Code marty@bubleylaw.com |                                      |   |   |   | FILE D<br>2024 JUH 25 PH 3: 2: |
|   |                                      | E-mail address:                                 | ication)  | 3:<br>2   |                                |
| For further                                 | information co                       | ncerning this matter, please of                 | all;  |   | $\sim 10^{-3} M_{\odot}$       |
| MARTIN                                      | BUBLEY                               |   | 813 963-7735<br>at ()   |   |                                |
| <del></del>                                 | Name of I                            | Person  | Area Code Daytime   | Telephone Number  |                                |
| Enclosed is                                 | s a check for the                    | following amount:                               |   |   |                                |
| \$25.00                                     | ) Filing Fee                         | ☐ \$30.00 Filing Fee &<br>Certificate of Status | \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | \$60.00 Filing Fee,<br>Certificate of Stat<br>Certified Copy<br>(additional copy is end | rus &                          |
| M   | Inilina Addrase                      |   | Street Address  |   |                                |

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

| GIL-MARI VENTURES, LLC  |  |                            |
|---|--|----------------------------|
| (Name of the Limited Liability Comp<br>(A Florida Limited   | nany as it now appears on our records.) Liability Company) | <del></del>                |
| The Articles of Organization for this Limited Liability Compan  | y were filed on APRIL 14, 2005                             | and assigned               |
| Florida document number L05000036876  |  |                            |
| This amendment is submitted to amend the following:   |  |                            |
| A. If amending name, enter the new name of the limited lia  | bility company here:                                       |                            |
| DAYANA VENTURES, LLC  | •  |                            |
| The new name must be distinguishable and contain the words "Limited Liab  | ility Company," the designation "LLC" or                   | the abbreviation "L.L.C."  |
| Enter new principal offices address, if applicable:   |  | 24                         |
| (Principal office address MUST BE A STREET ADDRESS)   |  | the abbreviation "L.L.C.F. |
|   |  | <u>v</u> 5                 |
|   |  | S. P.                      |
| Enter new mailing address, if applicable:   |  | <u> </u>                   |
| (Mailing address MAY BE A POST OFFICE BOX)  |  | <u></u>                    |
|   | -  |                            |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, enter the                          | name of the new registered |
|   |  |                            |
| Name of New Registered Agent:   |  |                            |
| New Registered Office Address:  | · <u>-</u>   |                            |
|   | Enter Florida street address                               |                            |
|   | , Florid   |                            |
|   | City   | Zip Code                   |
| New Registered Agent's Signature, if changing Registered Agent  | <u>:</u>   |                            |

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 Type of Action **Title** Name <u>Address</u>  $\square$ Add □Remove \_\_\_\_\_ □Change DAdd JUN 25 □Change □Add -□Remove \_\_\_\_\_ Change \_\_ □Remove \_\_\_\_\_ □Change Remove □Change  $\Box Add$ \_`□Remove

\_\_\_\_\_ Change

| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  |                              |      |
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| E. Effective date, if other than the date of filing:   |                              |      |
| (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 6  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records. | i05.0207 (3)(b) isted as the | r.   |
| f 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 a ecord is filed.  | fter the                     |      |
| 2024   |                              |      |
| Dated Jul 19.  |                              |      |
| 16y / Then   |                              |      |
| Signature of a member or authorized representative of a member   |                              |      |
| GJÆÐERT J. MUNOZ   |                              |      |

Filing Fee: \$25.00

Typed or printed name of signee