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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Dusiness Entity Name) |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only

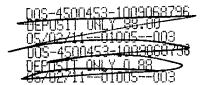


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SECRETARY OF STATE
TALL AHASSEF FLORIDA

T. CLINE

MAY - 4 2011

EXAMINER

COVER LETTER

| то: | Registration S Division of Co | Section orporations | | | | | |
|-----------------------------|----------------------------------|---|--|---|---------------------------------|-------------|--------|
| SUBJE | CCT: | DALVA IN | VESTMENT, LLC. | | | | |
| | | | ited Liability Company | | | | |
| | | f Amendment and fee(s) are su condence concerning this matte | - | | | | |
| · | | | JOSEPH ASOUS Name of Person | | | | |
| | | MANAGER | R - DALVA INVESTMENT, I | LC. | | | |
| 2750 NE 183RD STREET, #PH28 | | | | 1 | | | |
| | | M | Address IAMI, FLORIDA 33160 | • | | | |
| | | INSI F-mail address: (| City/State and Zip Code MORE@HOTMAIL.COM to be used for future annual report notif | ication) | SEC | 2011 N | er Jen |
| For furt | her information | concerning this matter, please of | - | <i>(culton)</i> | CRETARY | 2011 HAY -2 | 6 |
| JOSEPH ASOUS Name of Person | | | at (305) Area Code & Daytim | 401-2347 e Telephone Number | TARY OF STATE ASSEE, FLORIDA | AN We B | |
| Enclose | ed is a check for | the following amount: | | | A | ~1 | |
| \$25. | 00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed | S60.00 Filir Certificate Certificate (additiona | of Status Copy | | ı |
| · | Regist Divisi P.O. E | LING ADDRESS: tration Section on of Corporations Box 6327 trassee, FL 32314 | STREET/COURI Registration Sectio Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32 | n ations nter Circle | | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| DALVA INVE (<u>Name of the Limited Liability Con</u> (A Florida Limite | ESTMENT, LLC npany as it now appear ed Liability Company) | s on our records. |) | | | |
|--|---|------------------------|---------------------|--|--|--|
| The Articles of Organization for this Limited Liability Comparing L00700092007 Florida document numberL00700092007 | · | 09/10/2007 | | ned | | |
| This amendment is submitted to amend the following: | | | | | | |
| A. If amending name, enter the new name of the limited l | liability company here | <u>e</u> : | | | | |
| NOT AP | PLICABLE | | | | | |
| The new name must be distinguishable and end with the words "L" L.L.C." | imited Liability Compar | ny," the designation | on "LLC" or the abb | reviation | | |
| Enter new principal offices address, if applicable: | NOT APPLICA | ABLE | ALL SEC | | | |
| (Principal office address MUST BE A STREET ADDRESS | 2 | | RE ARY AHASSEE | | | |
| Enter new mailing address, if applicable: | NOT APPLICA | ABLE | PE ST | Comments of the Comments of th | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | RIOA | | | |
| The state of the s | | ur records, <u>ent</u> | er the name of | the new | | |
| New Registered Office Address: | Enter Florida street address | | | | | |
| | City | , Florida | 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 Changing Registered Agent, Signature of New Registered Agent

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** <u>Name</u> Address **Type of Action** MGRM Amber C. Asous 200 Ocean Lane Drive #801 ✓ Add Key Biscayne, Florida 33149 Remove Jehan A. Asous MGRM 200 Ocean Lane Drive #801 ✓ Add Key Biscavne, Florida 33149 Remove ☐ Add Remove Remove - Add ama D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 8TH Dated_ Signature of a m or authorized representative of a member JOSEPH ASOUS Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00