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T. HAMPTON

APR 3 0 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Dalino L.L. (Name of Limit	ed Liability Company)	
The enclosed Articles o	f Amendment and fee(s) are subn	nitted for filing.	
Please return all corresp	ondence concerning this matter to	o the following:	
,	Brid	Name of Person)	
	Do	(Firm/Company)	
	20533	Biscayne Blvd. #	-482
	Aventura, FL	33/80 (City/State and Zip Code)	
For further information	concerning this matter, please ca	н:	
Bna (Name	n Bussey	at (954) 804 - 3 (Area Code & Daytime T	elephone 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 enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dalino LL	C		_
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on d Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on Mach	24, 200 9 and	assigned
Florida document number <u>LO90000 28612</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and end with the words "LiL.L.C."	imited Liability Company,"	the designation "LLC" or the	ne abbreviatio
Enter new principal offices address, if applicable:	+		
(Principal office address MUST BE A STREET ADDRESS)			0
		09 AF	VISE OBS
		20	SET C
Enter new mailing address, if applicable:		29	ARY CC
(Mailing address MAY BE A POST OFFICE BOX)		3	2000 2000
		••	XXX AIX
		6	-
B. If amending the registered agent and/or registered		records, enter the name	
registered agent and/or the new registered office address h	<u>ere</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida		
	(City)	(Zip C	ode)
New Registered Agent's Signature, if changing Registered Agen	nt:		

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** <u>Name</u> **Address Type of Action** MGRM Diego Garcia Ibacz ☐ Remove Add 🗖 Remove □ Add Remove ☐ Add ☐ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please remove Diego Garcia - 1 Dacz from Dalino LLC and change Brian Bussey's Percentage interest to 100%. _____, 2009___. Dated April 27 Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00