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FO: Registration		a part	
Division of C	orporations		
SUBIFCT:	YND	ART. LLC.	
	Name of Limit	ted Liability Company	
, * , , , , , , , , , , , , , , , , , , ,	•	ومنه ہے ہی و ایا کہ ایک اور اور ایک اور	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
lease return all corresp	pondence concerning this matter	to the following:	
		Rene F. Leoncio	
		Name of Person	
	Leor	ncio & Associates, LLC.	
		Firm/Company	
	8302 North	west 103rd Street, Suite # 106	
		Address	
	Hialea	h Gardens, Florida 33016	
		City/State and Zip Code	
	rle	eoncio@bellsouth.net o be used for future annual report notification)	
or further information	concerning this matter, please c	all:	
	ene F. Leoncio	at (305) 558-1700	
	of Person	Area Code & Daytime 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 & ☐\$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enc	losed)
Regis	LING ADDRESS: tration Section ion of Corporations Box 6327 (1911) (1911) (1911)	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	

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ARTICLES	OF AMENDMENT
V	ΤΟ
· ARTICLES O	DF ORGANIZATION
	OF
	DART, LLC. Company as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Con	npany were filed on <u>January 24th, 2011</u> and assigned
Florida document numberL11000009231	
This amendment is submitted to amend the following:A. If amending name, <u>enter the new name of the limited</u>	d liability company here:
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	SS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
Intuining address MAT DE A FUST OFFICE DUA	

B. If amending the registered agent and/or registered office address on our records, enter the name of the new 54.0 registered agent and/or the new registered office address here:

					<u></u>	(ment)
Name of New Registered Agent:						
						14 212 22
New Registered Office Address:				达在:	တ	
		Enter Flori	da street ada	lress)	P.	
			, Florida	1000 1000 1000 1000	÷	E B
	City			ZiprCa	ode:	
New Registered Agent's Signature, if changing Registered Agent:				1		

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 arrending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

- -

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MGR = Ma MGRM = M	nager Janaging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Osmany Yndart	4910 Southwest 137th Court Miami, Elorida 33175	Add Remove
. <u> </u>			Add Remove
			Add Remove
			Add Remove
	<u></u>		Add Remove
<u></u>			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
 Dated	February 10,	2011	*
		nember of pathorized representative of a member Yanet Pena Typed or printed name of signee	
		Page 2 of 2 Filing Fee: \$25.00	
		1 mmg rcc. 323.00	

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