

11000038708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

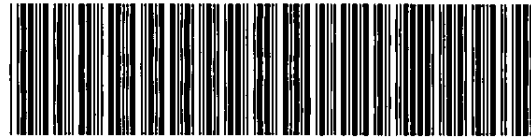
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GIRAFFAS DADELAND, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Rodney Quinn Smith**

Name of Person

**Gomm & Smith, P.A.**

Firm/Company

**175 S.W. 7th Street, Suite 2110**

Address

**Miami, Florida 33130**

City/State and Zip Code

**quinn.smith@gommsmith.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Rodney Quinn Smith** at **305 856-7723**  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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TALLAHASSEE, FL 32301

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GIRAFFAS DADELAND, LLC

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	GIRAFFAS USA HOLDING, INC.	1444 Biscayne Blvd	<input type="checkbox"/> Add
		Suite 216	<input checked="" type="checkbox"/> Remove
		Miami, Florida 33132	
MGRM	GIRAINVEST USA, LLC	1444 Biscayne Blvd	<input checked="" type="checkbox"/> Add
		Suite 216	<input type="checkbox"/> Remove
		Miami, Florida 33132	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

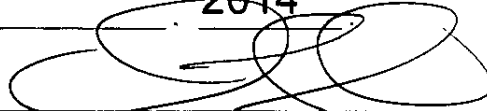
N/A

E. Effective date, if other than the date of filing: N/A (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 24

2014



Signature of a member or authorized representative of a member

Rodney Quinn Smith

Typed or printed name of signee

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CLERK OF STATE  
TALLAHASSEE, FLORIDA