L11000131388

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COVER LETTER

то:	Registration Se Division of Cor		•	
SUBJE	DASAY, L			
00 001			ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		DATAN DOROT		
			Name of Person	
		DOROT & BENSIMON,	PL	
			Firm/Company	
		20295 NE 29TH PLACE,	STE 201	
			Address	
		AVENTURA, FL 33180		
		·	City/State and Zip Code	
		INFO@DOROTBENSIMO		
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information o	oncerning this matter, please ca	all:	
DATA	N DOROT		305 9219421 at ()	
	Name o	f Person	305 9219421at ()Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
\$2:	5.00 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

DASAY, LLC	
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{1}{2}$	1/18/2011 and assigned
Florida document number L11000131388	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company b	nere:
he new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	# <u> </u>
	SSE YANG
Enter new mailing address, if applicable:	Mo 🛌 🌬
Mailing address MAY BE A POST OFFICE BOX)	E 9 7
	32 S
3. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here:	on our records, <u>enter the name of the</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter Fl	orida street address
	, Florida
City	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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	JORGE DAHDAH	1250 E. HALLANDALE BE	ACH BLVD.
		#1002	■ Remove
		Hallandak Beach, FL 3	3009 □ Change
MGRM	MAGALY SAYEGH	1250 E. HALLANDALE BEAC	H BLVD Add
		+1002	Remove
		Hallundale Beach, FL 33	©09 □ Change
MGR	FIVE DS FLORIDA	1250 E Hallandale Beach Blvd	Add
	HOLDING, LLC	1002	□ Remove
		Hallandale, FL 33009	□ Change
			Remove
			Change
		-	□ Remove
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E. Effective d	date is listed, the	date must be sp	secific and	cannot be pi	rior to date o	of tiling or n	nore than 90	(option days after fi	iling.) Pursi	ant to 60	05.020
	e date inserted i effective date o					tutory filir	ig requirem	ents, this	date will n	ot be lis	sted a
If the record				late, but	not an e	ffective	time, at :	12:01 a.	m. on th	ne earl	lier d
(b) The 90t	h day after t	ne recora i	s mea.								
Dated	Hb	24		2017) /				
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-		Signa	ture of a r	nember or a	uthorized re	presentation	of a member	er e			

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Filing Fee: \$25.00