L1200001353

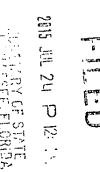
(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	÷#)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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COVER LETTER

ΓO: Registration SeDivision of Cor							
TINOK, LI							
Name of Limited Liability Company							
he enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.					
lease return all correspo	ondence concerning this matter t	o the following:					
	Isaac Benmergui						
		Name of Person					
		Firm/Company					
	1150 Kane concourse, Seco	ond Floor					
		Address					
	Bay Harbor Islands, FLorid	la 33154					
		City/State and Zip Code					
	GAONLAW@GMAIL.COM	o be used for future annual report no	otification)				
For further information of	concerning this matter, please ca		, .				
ISAAC BENMERGUI		305 3978547					
Name o	of Person	at () Area Code Dayti	ime Telephone Number				
Enclosed is a check for t	he 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

Tinok, LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our recorda Limited Liability Company)	<u>'ds.</u>)
The Articles of Organization for this Limited Liability (Florida document number L12000067353	Company were filed on 05/18/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lin</u>	nited liability company here:	
The new name must be distinguishable and contain the words "Liu	mited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		ds, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
		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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TOMAS WENGROWER	9295 Collins Avenue, 206	
		MIAMI BEACH, FL 33154	■ Remove
			Change
MGR	DAAT 72, LLC	1150 Kane Concourse	_ _ _ Add
		Second Floor	Remove
		Bay Harbor Islands, Florida 33154	☐ Change
			Add
			□ Remove
			□ Change
			□ Add
			Remove
			□ Change
			□ Add
			□ Remove
			Change
		添率 □ Add t T	
			Remove)
		Change	