# L13000075798

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# **COVER LETTER**

#### TO: Registration Section Division of Corporations

Hal America LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and feets) are submitted for f	ñhng
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Please return all correspondence concerning this matter to the following:

Eduardo Mendez 1

Name of Person

Mendez Molieri & CO

Firm/Company

2155 Coral Way

Address

Miami, FL 33145

City/State and Zip Code

djunco(g/minco-cpa.com

h-mail address: (to be used for future annual report nonfication)

For further information concerning this matter, please call:

Diandra Junco	305	742-2800	
Name of Person	_ at () Area Code	Daytime Telephone Number	

Enclosed is a check for the following amount:

■ \$25,00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

 Street Address:
 Mailing Address:

 Registration Section
 Registration Section

 Division of Corporations
 Division of Corporations

 The Centre of Tallahassee
 P.O. Box 6327

 2415 N. Monroe Street, Suite 810Tallahassee, FL 32314

 Tallahassee, FL 32303

 ARTICLES OF AMENDMENT

 TO

 ARTICLES OF ORGANIZATION

 OF

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#### (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/23/2013	and assigned
Florida document number L13000075798	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
DWS USA LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	······································
Enter new mailing address, if applicable:	=
(Mailing address MAY BE A POST OFFICE BOX)	• u • u
B. If amending the registered agent and/or registered office address on our records, <u>enter the agent and/or the new registered office address here:</u>	ie name of the new registered
Name of New Registered Agent:	

New Registered Office Address:

Enter Florida street address

\_ Florida \_

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 dutics, 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.

City

5: 5: 27

II 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

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<u>Title</u>	Name	Address	Type of Action
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			🗆 Remove
	· .		□Change
			ƏAdd
			🗆 Remove
			□ Change
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			🗆 Remove
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· . 			🗆 Add
			🗆 Remove
			□Change

E.

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

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ve date, if other than the date entive date is listed, the date must be sp	of filing:		(optional)	

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 21	2021 UBSeet Ly	
•		
	Signature of a member or authorized representative of a member	
Juan C. Lubschik		
	Typed or printed name of signee	