413000110442

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	<u> </u>
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COVER LETTER

TO:		Registration Section
	•	Division of Corporations

DANILBOKEH LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

ANGELINA SAAR

Name of Person

DANILBOKEH LLC

Firm/Company

1328 WILEY STREET, #201

Address

HOLLYWOOD FL 33019

City/State and Zip Code

ANGELINA.SAAR@HOTMAIL.COM

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

For further information concerning this matter, please call:

ANGELINA SAAR

__954**793-758**9

Name 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 &
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

DANILBOKEH LLC				TA PER
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears on o Liability Company)	ur records.)	
The Articles of Organization for this Limited Li	ability Company	were filed on 8/5/13		AUG 2 gned and assigned
Florida document number L13000110442				P
				PH 5: 03
This amendment is submitted to amend the following	owing:			3 DA
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ited Liability Company," tl	he designation "LLC"	or the abbreviation
Enter new principal offices address, if applications	able:	ANGELINA SAAF	₹	
(Principal office address MUST BE A STREE		1328 WILEY STR	REET, #201	1
		HOLLYWOOD, FI	L 33019	
Enter new mailing address, if applicable:	n o i n			
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>			
B. If amending the registered agent and/or the new registered of			ecords, enter the n	name of the new
registered agent und of the new registered or	ite water obs her	 -		
Name of New Registered Agent:	ANGELINA	SAAR		
New Registered Office Address:	1328 WILE	Y STREET, #201		
		Enter Flo	orida street address	
	HOLLYWO	OD	, Florida <u>33</u> 019)
		City	Zi	ip Code
New Registered Agent's Signature, if changing R	Registered Agent:			

If Changing Registered Aged Signature of New Registered Agen

Page 1 of 3

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ANGELINA SAAR	1328 WILEY ST. #201	_ Add
		HOLLYWOOD, FL 33019	Remove
			_
			Add
			Remove
			Add
	•		Remove
			-
			Add
			Remove TALLAHASST OF STATE REMOVE TALLAHASST OF STATE REMOVE TALLAHASST OF STATE AUG 26 PM 5: 03
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			10 _A
			Add
			Remove

		
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ALICUST 24	2012	
AUGUST 21	2013	
<u> </u>	Yael Hysaak	
ANGELINA SAA	ature of a member or authorized representative of a member	
	Typed or printed name of signee	
	Page 3 of 3	13 AUG 26
	Filing Fee: \$25.00	2
