## LB000178285

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## COVER LETTER

TO:	Registration Division of C			
SI ID II	DGAF P	ARTNERS II, LLC		
ฐบอม	.CT:	Name of Lim	ited Liability Company	
The en	closed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please	return all corres	pondence concerning this matter	to the following:	
		RUBIDIA DE LA FE		
			Name of Person	
			Firm/Company	
		16340 NW 59TH AVENU	F.	
			Address	
		MIAMI LAKES, FL 33014	4	
		ruby@teamdelafe.com	City/State and Zip Code	
		b-mail address (d	to be used for future annual repurt not	dication)
For fur	ther information	i concerning this matter, please ca	<b>1</b> ]!:	
RUBII	DIA DE LA FB	- CD	305 828-0001 at (	
	Vain	c of Person	Area Code Daytin	ie Leiephone Numbei
Enclos	ed is a check for	r the following amount.		
<b>■</b> \$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 Tatlahassee, Fl. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DGAF PARTNERS II				
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)		<del></del>	
The Articles of Organization for this Limited Liability C	Company were filed on 12/31/2013	a	nd assig	gned
Florida document number 113000178285	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	sited liability company here:			
The new name must be disringuishable and contain the words "Lin	nited Liability Company," the designation "LLC" or	the abbrevia	ion "L.L.	<u>с.</u>
Enter new principal offices address, if applicable:		* #*	12.3 12.3	
(Principal office address MUST BE A STREET ADD)	RESS)			<b>*</b> = - 1
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Enter new mailing address, if applicable:			27-0	:
(Mailing address MAY BE A POST OFFICE BOX)				
		••	ر <del>اد</del> د⊶ا	_
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>e</u> d <u>ress here</u> :	uter the r	<u>іапіе о</u>	f the ne
Name of New Registered Agent:				
New Registered Office Address:	N. D. C.			
	Enter Florida street address			
	, Florid	la	_ <del></del>	
	Cip	Zij	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
MGR	ADDYS SAROZA-SOTO	16340 NW 59 Ave,Miami Lakes,Fl	■ Add
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effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at  if the date inserted in this block does not meet the applicable statutory filing requirements, turnent's effective date on the Department of State's records.	this date will not be li	isted a
record specifies a delayed effective date, but not an effective time, at 12:01		
record specifies a delayed effective date, but not an effective time, at 12:01 ne 90th day after the record is filed.		
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ne 90th day after the record is filed.	128 	2817 CCT
ne 90th day after the record is filed.  ed Oct 26 2017.  Rec 2017.		2#17 CCT 3 I
ne 90th day after the record is filed.  ed Oct 26 2017.  Rec 2017.		
ed Oct 26 201)  Signature of a member of authorized representative of a member  Rub; di — M. De J. Fe		2017 CCT 3 1 // // // // // // // // // // // // /

Filing Fee: \$25.00