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COVER LETTER

TO: Registration Division of		ons							
SUBJECT:	DINA	ENTERP Nam	RISES ne of Limited	Liability C	Company	- .			
The enclosed Article									
Please return all corr	respondenc					BRIT	0	,	
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For further informat					3	· 			
UNA I	me of Perso	o n		at (An	≤∠/) ea Code	Day	time Telephor	ne Number	
Enclosed is a check		_							
\$25.00 Filing Fe	ee 🗖	\$30.00 Filing Fe Certificate of S	e & I Status		ied Cop			\$60.00 Filing Certificate of Certified Co (additional cop	of Status & Opy

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**

DINA ENTERPRISES	5 LLC
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lial	as it now appears on our records.) oility Company)
The Articles of Organization for this Limited Liability Company we Florida document number 4 140000 3 9 4 5 4.	ere filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	y company here:
SADIE ENTERPRISES LLO	=
The 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:	1950 GREENGARD ST
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO 32827
-	<u>.</u>
Enter new mailing address, if applicable:	7950 GREENGARD ST CON CONTRACT
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO 32827 0
···	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ee address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida 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

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
MGR	NEIL G. SMITH	13889 SACHS ANE ORLANDO 32827	Add
		13889 SACHS AVE ORLANDO 32827	Remove
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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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Change

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	Thomas .
Effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of filing or	(optional) more than 90 days after filing.) Pursuant to 60:
Note: If the date inserted in this block does not meet the applicable statutory filidocument's effective date on the Department of State's records.	ing requirements, this date will not be list
document's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective	time at 12:01 a m on the earli
The 90th day after the record is filed.	diffe, at 12101 and on the carr
Dated <u>Sept 27</u> , <u>2016</u> .	
DB 775 Signature of a member or authorized representative	
1 \A = \frac{-\tau}{2}	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00