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S. WARREN JUN 1 2 2017

COVER LETTER

Division of Cor			
SUBJECT: DAORO IN	TERNATIONAL LLC	ited Liability Company	
	Name of Lim	ned Liability Company	
	Amendment and fee(s) are sub	-	
r rease retain an correspo.	nachee concerning this matter	to the following.	
	RICHARD G. TOLEDO, E	ESQ.	
•		Name of Person	
		Firm/Company	
	14 NE 1ST AVENUE, SUI	TE 1400 Address	·
		rudiess	
	MIAMI, FLORIDA 33132		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
Car further information as	oncerning this matter, please ca	·	•
roi further information ec	meerning this matter, please ca	111.	
RICHARD G. TOLEDO,	ESQ.	at (305) 577-9977	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e 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

TO ARTICLES OF ORGANIZATION OF

DAORO INTERNATIONAL LLC

(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 JANUARY 5, 2015 and assigned Florida document number L15000001433 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida 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

Page 1 of 3

or removed	from our records:	manago, <u>omor aro man, namo, ana agaroso</u>	or each person point access
MGR = N AMBR = A	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM_	SAMI SHEERO	2875 NE 191 ST #401	Add
		AVENTURA, FLORIDA 33180	■ Remove
		·	Change
MGRM	DALIA COHEN	2875 NE 191 ST #401	Add
		AVENTURA, FLORIDA 33180	Remove
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E. Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	lock does not meet the application	able statutory filing requirements,	ptional) after filing.) Pursuant to 605.0207 (3)(b) this date will not be listed as the
If the record specifies a delaye (b) The 90th day after the rec		t an effective time, at 12:0	1 a.m. on the earlier of:
Dated JUNE 5	, 2017		F JUN 17 JUN SECRETI SALLÁNH
	Illand /	idely	FILE JUN-9
	_	orized representative of a member	
R	ICHARD G. TOLEDO	ESQ - AUTHORIZED	REPRESENTATIVE
	r ypeu or prime	d name of signee	Con Total

Page 3 of 3

Filing Fee: \$25.00