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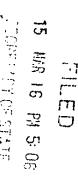
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APR 02 2015 S. YOUNG

## COVER LETTER

	egistration Se livision of Cor			
SUBJECT	: Dante	Name of Lim	Enterprise, LL ited Liability Company	<u> </u>
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		Car	y Danton Name of Person	<del></del>
		Danten	Weisman Ent	exprise, LCC
		8045 Nover	nac Avenue	<del></del>
		Miami Be	City/State and Zip Code  Omed. Miami. et to be used for future annual report not	do fication)
For further	r information c	oncerning this matter, please co	-	P. C
Gary	Dant Name o	Person	at ( <b>786</b> ) 457 Area Code Daytim	-4440 S
Enclosed i	s a check for th	ne 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

## TO ARTICLES OF ORGANIZATION OF

`		, , ,	
The Articles of Organization for this Limited Lia	ability Company	were filed on Fcb	nay 24,2015 and assigned
Florida document number <u>L 150 00038</u>			O
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and end with the w	vords "Limited Liab	oility Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	8045 No	remac Avenue
(Principal office address MUST BE A STREET	(ADDRESS)		ach, Florida 3314
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>80X)</u>	8045 No Miami B	remac Avenue each, Florida 33141
B. If amending the registered agent and/or registered agent and/or the new registered off  Name of New Registered Agent:			records, enter the name of the nev
New Registered Office Address:	8045	Novemac A Enter Florida str	venue)
	Miami	Beach City	Florida 33141 Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:		
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the recompany has been notified in writing of this c	r and complete tered agent as p egistered office	performance of my a provided for in Chapt	luties, and I am familiar with and ter 605, F.S. Or, if this document is nfirm that the limited liability
	If Cha	nging Registered Agent, S	ignature of New Registered Agent
	Page	1 of 3	9

## Authorized Member being added or removed from our records: MGR = Manager AMBR = Authorized Member **Type of Action** Name <u>Address</u> <u>Title</u> ☐ Remove □ Add ☐ Remove □ Add ☐ Remove 古 Remove ړې \_□ Add \_□ Remove \_□ Add ☐ Remove

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Page 3 of 3

Filing Fee: \$25.00