

L19000086864

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JULIA HARRIS

APR 19 2018
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: D.A.P. R/E INVESTMENTS, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Thomas J. Palmieri, Esq.

Name of Person

Thomas J. Palmieri, P.A.

Firm/Company

340 Minorca Avenue, Suite One

Address

Coral Gables, Florida 33134

City/State and Zip Code

irzapico@zapicolaw.net

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

For further information concerning this matter, please call:

Heana Ruiz Zapico, Esq.

305 412-9356
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

D.A.P. R/E INVESTMENTS, 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 05/15/2015 and assigned
Florida document number L15000086864.

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 "LLC."

Enter new principal offices address, if applicable:

12200 SW 80th STREET

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FLORIDA 33183

Enter new mailing address, if applicable:

12200 SW 80th STREET

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FLORIDA 33183

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:

ILEANA RUIZ ZAPICO, ESQ.

New Registered Office Address:

10691 NORTH KENDALL DRIVE, STE. 303-B

Enter Florida street address

MIAMI

City

Florida 33176

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	ROBERT FIGUEROA	12200 SW 80th STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33183	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHELLE TORRENTE	12200 SW 80th STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33183	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	DAVID A. PEREZ	9700 NW 17th STREET	<input type="checkbox"/> Add
		MIAMI, FL 33172	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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MAY 10 2018

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

F. Effective date, if other than the date of filing: April 17, 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated APRIL 13 2018

Signature of a member or authorized representative of a member

DAVID A. PEREZ

Typed or printed name of signee

PLASSELOR

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