1/6000025388

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COVER LETTER

	gistration Secti vision of Corpo					
SUBJECT:	Dinacar Enter	prises LLC				
Sobolier.		Name of Limi	ited Liability Company			
		nendment and fee(s) are sub-	-			
	•	Dinah Mendez	· ·			
		Dinacar Enterprises LLC	Name of Person			
		2180 Central Florida Parkv	Firm/Company vay, Suite A11			
		Orlando, FL 32837	Address			
		dinacarent@gmail.com	City/State and Zip Code			
For further i	nformation con	E-mail address: () cerning this matter, please ca	to be used for future annual report noti	fication)	5.	13.00 10.00 10.00
Dinah Mend			at () 800-5516		52 四月	\$ 553.4 \$ 513.4 \$ 513.4
	Name of P	erson	Area Code Daytim	e Telephone Number	е: Би	OF STA
Enclosed is	a check for the	following amount:			00	SHOLLS TE
\$25.00 1	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		I 5

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

DINACAR ENTERPRISES LLC			
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)		
The Articles of Organization for this Limited Liability	y Company were filed on Florida	and assign	ed
Florida document number L16000025388	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company here:		
The new name must be distinguishable and contain the words "l	imited Liability Company," the designation "LLC" or the abl	previation "L.L.C.	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
	· · · · · · · · · · · · · · · · · · ·		
Pagarana wa Marandala a Manadia ka			
Enter new mailing address, if applicable:			
<u>(Mailing address MAY BE A POST OFFICE BOX)</u>	-	 	
			
		ت	25
	gistered office address on our records, enter	the name of	the nev
registered agent and/or the new registered office a	<u>aaress here</u> :	<i>></i> ;	- 4 <u>5</u> -
		- `	
Name of New Registered Agent:		_4.	-5Ã
New Registered Office Address:		<u>ن</u> ق	22.2
New Registered Office Address.	Enter Florida street address		- 등 등 - 프
	. Florida		(i)
·	, Florida	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>	Address	Type of Action
MGR	CARLOS A. FIGUEROA	12382 ACCIPITER DR	
		ORLANDO FL 32837	
			A Kemove
			■ Change
MGR	DINAH MENDEZ	12382 ACCIPITER DR	
		ON ANT O III 20067	
		ORLANDO FL 32837	П п
			□ Remove
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	ust be specific and cannot be prior to block does not meet the applicab	date of filing or more than 90 da	_ (optional) ays after filing.) Pursuant to 605.0207 (3 ints, this date will not be listed as th
he record specifies a delaye The 90th day after the re		an effective time, at 13	2:01 a.m. on the earlier of:
Dated JUNE 21	2019		
		- · 	

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Typed or printed name of signee

Filing Fee: \$25.00