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	Registration Se Division of Cor			
CHD IE		OBAL ENTERPRISE LLC		
SUBJEC	-li <u></u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	endence concerning this matter	to the following:	
		Fabio Rabinovich		
			Name of Person	
		DAKIA GLOBAL ENTEI	RPRISE LLC	
			Firm/Company	
		333 SE 2nd Ave, Suite 200	00	
			Address	
		Miami/Florida, 33131		
			City/State and Zip Code	
		fr@dakiaglobal.com		
		E-mail address: (to be used for future annual report no	rtification)
For furth	er information c	oncerning this matter, please c	all:	
Fabio R	abinovich		786 2829787	
	Name o	f Person		me Telephone Number
Enclosed	d is a check for the	he following amount:		
□ \$ 25.	00 Filing Fec	■ \$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		Street Address: Registration S	ection
	Registration ! Division of C		Division of Co	
	P.O. Box 632	27	The Centre of	Tallahassee
	Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 F 28 FH 12: 47

DAKIA GLOBAL ENTERPRISE I	LLC	20 111E-41
(Name of the Limit	ed Liability Company as it no (A Florida Limited Liability Co	ow appears on our records.) ompany)
The Articles of Organization for this Limited L Florida document number L16000138471	iability Company were file	ed on 07/22/2016 and assigned
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability com	apany here:
The new name must be distinguishable and contain the w	ords "Limited Liability Compa	any," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/or ragent and/or the new registered office address		on our records, <u>enter the name of the new registerec</u>
Name of New Registered Agent:	RML Isla Holdings LLC	
New Registered Office Address:	333 SE 2nd Ave, Suite 2	2000
		Enter Florida street address
	Miami	, Florida ³³¹³¹
	City	

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
AMBR	HASB GLOBAL FRANCHISE A	444 Brickell Ave, STE 51-374, Miami, Fl 33131	□ Add
			Remove
			🗆 Change
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
			Change

lan	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
fan e Note	ctive date, if other than the date of filing:
	ord 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 filed.
Date	d Wednesday, January 22nd , 2020 .
	Azv
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00