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SECRETARY OF STATE

17 CHANGER OF FORM

D. SCOTT JUN 1 5 2017

COVER LETTER

	egistration Se ivision of Cor				
SUBJECT	DNLAB U				
SUBJECT	:		nited Liability Company	·	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
		ondence concerning this matter	•		
		Nicolas Derouin			
			Name of Person		
		DNLAB USA LLC			
			Fimi/Company	 	
		2100 Park Avenue; Unit 2	2118		
			Address		
		Miami Beach, FL 33139		7.5 T	Í
			City/State and Zip Code	三型 三型	JUN 12
		derouin.nicolas@gmail.con			12
For further	information c	n-man address: (oncerning this matter, please c	to be used for future annual report notifall:	cation)	
Nicolas De	erouin		786 4488635 at ()		8†8
	Name o	f Person		Telephone Number	-
Enclosed is	s a check for th	ne following amount:			
\$25.00	Filing Fce	□ \$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. Be	ING ADDRESS: ation Section on of Corporations ox 6327 assec, FL 32314	STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ntions nter Circle	

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	Arnaud Luguet 171 N Shore Drive; Unit 171-	100 to 10
registered agent and/or the new registered of New Registered Agent:	Arnaud Luguet 171 N Shore Drive; Unit 171-	8 to 18
registered agent and/or the new registered of New Registered Agent:	Arnaud Luguet	100 to 10
registered agent and/or the new registered (office address here:	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered office address office address here:	07
		12 2
(Mailing address MAY BE A POST OFFICE	<u></u>	
Enter new mailing address, if applicable:		SECON A
•	<u> </u>	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new principal offices address, if appli	cable:	
The new name must be distinguishable and contain the	words "Limited Liability Company," ti	the designation "LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name	of the limited liability company	<u>y here</u> :
This amendment is submitted to amend the fol	llowing:	
Florida document number L16000138550	·	
The Articles of Organization for this Limited I		n 07/25/2016 and assigned
·	ilted Liability Company as it now ap (A Florida Limited Liability Compar	iny)

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

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 Type of Action <u>Title</u> <u>Name</u> <u>Address</u> □ Add □ Remove ☐ Change □ Add □ Remove _ Change _□ Add _□ Remove □ Change CRECIPIE Remove

Charge 6: 48 ☐ Remove _ Change □ Add ☐ Remove ☐ Change



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<i>←</i> 2	ignature of a member or auth	orized representative of	a member		

Page 3 of 3
Filing Fee: \$25.00