

Florida Department of State
 Division of Corporations
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L16000192117

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 Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 DNC MIAMI, LLC**

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DNC MIAMI, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Inaki Saizarbitoria, Esq.

(Contact Person)

Inaki Saizarbitoria, Esq. P.A.

(Firm/Company)

21 S.W. 15 Road, Suite 200

(Address)

Miami, FL 33129

(City/State and Zip Code)

For further information concerning this matter, please call:

Olga Saizarbitoria,

(Name of Contact Person)

at (305) 374-4106

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
☒ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

CR2E079 (2/14)

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DNC MIAMI, 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 12/16/2016 and assigned
Florida document number L16000192117

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

888 BISCAYNE BLVD.

SUITE 3403

MIAMI, FLORIDA 33132

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

888 BISCAYNE BLVD.

SUITE 3403

MIAMI, FLORIDA 33132

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:

New Registered Office Address:

Enter Florida street address

City

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	KINGA J. KONSORSKA	1300 BRICKELL BAY DRIVE	<input type="checkbox"/> Add
		MIAMI, FL. 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANDRE CHELHOT	888 BRICKELL BLVD.	<input checked="" type="checkbox"/> Add
		SUITE 3403	<input type="checkbox"/> Remove
		MIAMI, FLORIDA 33132	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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Dated 11-14 2017

Typed or printed name of signer