## L17000144656

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Runings Entity Name)
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

Registration Section
Division of Corporations

**)**:

D TEOR	Export LLC	•	
	Name of Lin	nited Liability Company	
e enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
ase return all corres	pondence concerning this matter	to the following:	
	Noel Daniel		
		Name of Person	
	Danway Export LLC		
		Firm/Company	
	7205 NW 5th Ct. #202		
		Address	
	Margate Florida, 33063		
		City/State and Zip Code	
	noeldaniel24@hotmail.com	1	
	E-mail address: (	to be used for future annual report noti	fication)
further information	concerning this matter, please c	all:	
el Daniel		954 6874178 at ()	
Name	of Person	Area Code Daytime	e Telephone Number
closed is a check for	the following amount:		
S25.00 Filing Fee	S30.00 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 Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Danway Export LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) ie Articles of Organization for this Limited Liability Company were filed on July 5th 2017 orida document number \_\_\_\_\_L17000144656 his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: ie new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) . If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

imending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager

1BR = Authorized Member

<u>le</u>	<u>Name</u>	Address	Type of Action
1BR	SADE BOYEA		
		Address  1921 Rhode Island Avenue NE. Washington DC .200	DINA PROPROVE
			_ □Change
			□Add
			□Remove
			□Change
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tive date, if other than the date of filing:	optional) ore than 90 days after filing ) Pursuant to 60	5 0207
If the date inserted in this block does not meet the applicable statutory filing	ng requirements, this date will not be lis	ted as
ment's effective date on the Department of State's records.		
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. filed.	on the earlier of: (b) The 90th day after	er the
(C) (51) (Marco		
October 8 2020		
- Jane		
Signature of a member or authorized representative	e of a member	
- Grand of addition of representative		

. . . .