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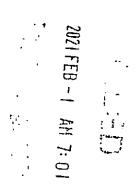
(Requestor's Name)						
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COVER LETTER

	gistration Sec vision of Corp			,	,	
		RVICES LLC	•	بد	2	
SUBJECT:						
The enclose	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please retur	n all correspo	ndence concerning this matter	to the following:			
		LUIS R. SMITH				
			Name of Person	- .		
		TAXES USA LLC				
			Firm/Company			
		5892 STIRLING RD # 4				
			Address	·· <u> </u>		
		HOLLYWOOD, FL 3302	21			
			City/State and Zip Code			
		INFO@TAXESUSAMIAM	II.COM to be used for future annual:	renort notificati	on)	
For further	information co	oncerning this matter, please ca		. op. o	,	
		meeting this matter, preuse et)-2429		
LUIS R. SM	Name of	Dascon	at ()		ephone Number	
	Name of	retson	Area Code	Daymine Ter	epitone (valuoe)	
Enclosed is	a check for th	e following amount:				
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registra Division The Cer 2415 N	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DALIA SERVICES LLC	2021 FEB - 1 AH 7: 01
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) Hability Company)
The Articles of Organization for this Limited Liability Compan	y were filed on 05/16/2018 and assigned
Florida document number L18000123427	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
NECESITO PUBLICIDAD LLC	
The new name must be distinguishable and contain the words "Limited Lia	bility 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)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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.

City

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 = M $AMBR = A$	lanager .uthorized Member	tan peng	
<u>Title</u>	<u>Name</u>	Addres21FEB - 1 AM 7: 01	Type of Action
			DAdd
			□Remove
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Effective date, if other than the date	of filing:	(opt	ional)
(If an effective date is listed, the date must be sp. Note: If the date inserted in this block didocument's effective date on the Department.	secific and cannot be prior to date of to oes not meet the applicable statu	filing or more than 90 days after	er filing.) Pursuant to 605.0207 (3)(8
he record specifies a delayed effective date ord is filed.	e, but not an effective time, at 12	:01 a.m. on the earlier of: ((b) The 90th day after the
Dated JANUARY 26	2021		
V Muli	ture of a member or authorized repr	resentative of a member	
1			
MARCOS G. VILORIA			

Typed or printed name of signee