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(Address)						
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COVER LETTER

Division of Corporations
SUBJECT: Dishine Orban Properties, LLC, a Florida Name of Limited Liability Company Limited Liability Company Limited Liability Company
Name of Limited Liability Company Line ited Lie Diling Company
The enclosed Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jorge R. Hernander Name of Person
Firm/Company
536 Nw 23 co.114
City/State and Zip Code
Email address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jorge 12. Hernander at 35 216 - 2701 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\overline{35.00} (\overline{100} \overline{100} \overline{100})
S25.00 Filing Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe
. MAILING ADDRESS: STREET/COURIER ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)

(Name of the Limited Liability Company as it now appears on our records.)

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were filed on $\frac{5}{}$	121/18	and assi	gned
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Enter Florida	street address		
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	hity company here ty Company," the designation of the second of the sec	Lity company here: ty Company," the designation "ELC" or the address on our records, enter: Enter Florida street address Florida	Sity company here: Ty Company," the designation "L.C" or the abbreviation "L.C" or the abbrevia

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
A <u>mbr</u>	Jurye R. Hernandez		🗆 Add
•			☐ Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effective date, if other than the date of filing: (optional)	
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on) The 90th day after the record is filed.	the earlier of:
Dated	
The Robert Contract of the Con	
Signature of a member or authorized representative of a member	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00