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(((H19000315541 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Phone Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

| Email | Address:_ |  |  |  | <del>_</del> |
|-------|-----------|--|--|--|--------------|
|-------|-----------|--|--|--|--------------|

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

| DV BOX GROUP LLC      |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$25.00 |
|                       |         |

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Help

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| - |  | E |
|---|--|---|
|---|--|---|

|  | 2019 OCT 24 P 3:58                                |
|--|---|
| DV BOX GROUP LLC   | •   |
| (Name of the Limited Limited Company as It now and (A Florida Limited Limited Company)     | COLUMN STEEL LEGISTER                             |
| The Articles of Organization for this Limited Liability Company were filed on              | 10/16/2019 and assigned                           |
| The Articles of Organization for this Emission Property 7                                  |   |
| Florida document number L19000250849   |   |
| This amendment is submitted to amend the following:  |   |
| A. If amending name, enter the new name of the limited liability company                   | here:   |
|  |   |
| The now name must be distinguishable and contain the words "Limited Liability Company," if | ne designation "LLC" or the abbreviation "L.L.C." |
|  |   |
| Enter new principal offices address, if applicable:  |   |
| (Principal office address MUST BE A STREET ADDRESS)  |   |
|  |   |
|  |   |
| n  |   |
| Enter new mailing address, if applicable:  | <del></del>                                       |
| (Mailing address MAY BE A POST OFFICE BOX)   |   |
|  |   |
|  | the new   |
| B. If amending the registered agent and/or registered office address                       | on our records, inter the name of the ne-         |
| registered agent and/or the new registered office address here:                            |   |
|  | •   |
| Name of New Registered Agent:  |   |
|  |   |
| New Registered Office Address:  Enter  | Florida street address                            |
|  | 100 sui da  |
| City   | , Florida   |
| Caty   | ·   |

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

□ Remove

□ Add

☐ Remove

☐ Change

\_□ Add

MGR - Manager

10/24/2019 14:39 3052201440

AMBR = Authorized Member

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

| Title       | Name             | Address                    | Type of Action |
|-------------|------------------|----------------------------|----------------|
| MGR         | VALERIO, PBDRO J | 14750 SW 26 STREET STE 116 |                |
| <del></del> |                  | MLAMI, FL 33185            | ■ Remové       |
|             |                  |                            | B Remove       |
|             |                  | 14750 SW 26 STREET STE 116 | D Change       |
| MGR         | BOADA, ODILA B   | 14/50 SW 26 STREET STE 110 | Add            |
|             |                  | MIAMI FL 33185             | □ Remove       |
|             |                  |                            | Chango         |
| 14.         |                  |                            | D Add          |
|             | •                |                            | C Remove       |
|             |                  |                            | ☐ Change       |
|             |                  |                            | □ Add          |

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