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## **COVER LETTER**

TO:		istration Sectision of Corp			ė.	
SUBJE	CT.	DANAFE LI	_C			
SOBJE	CI.		Name of Lim	ited Liability Company		<del></del>
The enc	losed	Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please r	eturn	all correspond	dence concerning this matter	to the following:		
			Jannett Rodriguez			
				Name of Person		<del></del>
			H&R Tax Advisors LLC			
				Firm/Company		
			12741 SW 38 Terr	•		
				Address		
			Miami FL 33175			
				City/State and Zip Code		
			jannett@hrtaxadvisors.com E-mail address: ()	to be used for future annual re	port notification)	<del></del>
For furtl	her in	iformation cor	ncerning this matter, please ca		,,	
			3		6252	
Jannett Rodriguez  Name of Person		at ()	Daytime Telephone	Number		
Enclose	d is a	check for the	following amount:			
	.00 Filing Fee		□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$6	0.00 Filing Fee,
	.001	ing rec	Certificate of Status	Certified Copy (additional copy is enclosed)	sed) C	ertificate of Status & ertified Copy dditional copy is enclosed)
		ling Address:		Street Add	Iress:	

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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**

DANAFE LLC		·	
( <u>Name of the Limited )</u> (A	<u>Liability Compan</u> Florida Limited Li	y as it now appears on or ability Company)	<u>ur_records.</u> )
The Articles of Organization for this Limited Liab	ility Company v	were filed on 12/12/20	and assigned
This amendment is submitted to amend the followi	ing:		
A. If amending name, enter the new name of th	<u>ie limited liabil</u>	lity company here:	
Not applicable			
The new name must be distinguishable and contain the word	s "Limited Liabilit	ty Company," the designat	tion "LLC" or the abbre visition "L.L.C."
Enter new principal offices address, if applicabl	le:	Not applicable	ECRE
Principal office address MUST BE A STREET		•	>
The part of proceedings of the part of the	100110007		- 第3 - <b>3</b> - 下
Enter new mailing address, if applicable:		Not applicable	HIO: I
Mailing address MAY BE A POST OFFICE BO	)X)	•	
			, · ·
3. If amending the registered agent and/or regingent and/or the new registered office address had Name of New Registered Agent:			s, enter the name of the new regist
12741 CW 20T		TROD	
New Registered Office Address:	12/71 DW JOHN	Enter Florida stre	eet address
	N 4 1 4 N 4 1	13/10/13/144 3/14	
-	MIAMI	City	, Florida 33175 Zip Code
New Registered Agent's Signature, if changing Reg		City	гар Сойс

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>	Name	Address	Type of Action
MGR	TRUCKFRESH USA LLC	11402 NW 41 STREET, STE 202, DORAL, FL 331	.78 <b>■</b> Add
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fective date, if other than the date of filing:	ior to date of fili	ng or more than 0	(optional)	) Pureua	nt to 605 021
te: If the date inserted in this block does not meet the appl	licable statutor				
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ecord specifies a delayed effective date, but not an effective is filed.	e time, at 12:01	a.m. on the ear	dier of: (b) Th	e 90th c	lay after th
February 26 2020	/				
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Signature of a member of au	ubarizad rangas	ntative of a mem	her		