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(Address) (City/State/Zip/Phone #)	
(Business Entity Name) (Document Number)	
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		(	COVER LETTER	
	Registration Se Division of Cor			
		ONSULTING LLC		
SUBJEC	F:	Name of Lim	ned Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		JIMMY LEVY		
			Name of Person	
			Firm/Company	
		20815 NE 16 AVENUE S	UITE B17	
		MIAMI, FI, 33179	Address	
		FERNANDOGAVIRIA@C	City/State and Zip Code	
		-	to be used for future annual report no	tification)
I or furthe	r information c	oncerning this matter, please e	all:	
<u>ЛММҮ I</u>	.EVY		305 303-1055	
	Name o	f Person	at (} Area Code — Daytii	ne Feleph
Enclosed	is a check for th	ne following amount:		
<b>₽</b> \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy raddmoral copy is enclosed)	

20 JUL 14 C. 24

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Daytime Telephone Number

□ \$60.00 Filing Fee.

Certified Copy

Certificate of Status &

(additional copy is enclosed)

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF DANFEL CONSULTING LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 04/20/2020 and assigned

This amendment is submitted to amend the following:

Florida document number 1.20000107607

#### A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new	principal	offices	address,	if ap	plicable:	
	1/1 / / / / / / / / / / / / /					

(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 address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	·····
	, I	Florida

#### 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. Thereby 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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JIMMY LEVY	20815 NE 16 AVENUE SUITE B17	🗋 Add
		MIAMI, FL 33179	Remove
			🗔 Change
MGR	FERNANDO GAVIRIA	20815 NE 16 AVENUE SUITE B17	🖬 Add
		MIAMI, FL 33179	🖸 Remove
			🖸 Change
			🗆 Add
			Remove
			□Change
	····		🗆 Add
			□Remove
			🗋 Change
			🖂 Add
			⊡Remove
			□ □Change
			🗆 Add
			🗖 Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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#### E. 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.) Pursuant to 605,0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

MA Dated	$\gamma^{4} \qquad \gamma^{2020}$
- Milea	
	Signature of a member or authorized representative of a member
	Jimmy LEVY
	Lyped of printed name of signee