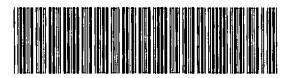
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(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
. DAMAI OI	RLANDO I.L.C		
SUBJECT:			
***************************************	Nume of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Xiao Pang		
		Name of Person	
	Damai Orlando LLC		
		Firm/Company	
	5728 Major Blvd Suite 702	2	
		Address	
	Orlando, Fl 32819		
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report	notification)
For further information of	oncerning this matter, please c	all:	
Guillermo Pulgarin		786 210 2027	
Name o	f Person	at () Area Code Da	ytime Telephone Number
Enclosed is a check for the	nc following amount:		
<b>■ \$25,00</b> Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address	
Registration S		Registration	
Division of C P.O. Box 632	•		Corporations of Tallahassee
U. DUA 032	•	The Control	/i i uitati <b>a3300</b>

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAMAI ORLANDO LLC	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5728 MAJOR BLVD STE 702
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32819
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:	address on our records, enter the name of the new register
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 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>	<u>Address</u>	Type of Action
MGR	NAGARO, JUAN FRANCISCO	210 174 ST SUNNY ISLES BEACH FL 33160	
			■Remove
			□Change
MGR	AUSCH, JOSEPH	210 174 ST SUNNY ISLES BEACH FL 33160	□Add
			■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Addi
			□Remove
			□Change
	<del></del>		□Add
			□Remove
			□Change

	AUGUST 17, 2022
Tective date, if other than th	he date of filing: (optional)
	nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 block does not meet the applicable statutory filing requirements, this date will not be listed
ote: If the date inserted in this	Department of State's records.
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effect	
ote: If the date inserted in this ocument's effective date on the	Department of State's records.
ote: If the date inserted in this becument's effective date on the record specifies a delayed effect is filed.	Department of State's records.  tive date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effect is filed.  AUGUST 17	Department of State's records.  tive date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effect is filed.  AUGUST 17	Department of State's records.  tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effect is filed.  AUGUST 17	Department of State's records.  tive date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the 2022  Standard of a member or authorized representative of a member