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T. MATTHEWS JUN 10 2022

COVER LETTER

TO: Registration Section

Division of Cor	porations					
	ORT LLC					
SUBJECT:	Name of Lim	ited Liability Company	~			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	IRIS M BRICENO					
		Name of Person				
	Name of Limited Liability Company based Articles of Amendment and fee(s) are submitted for filing. turn all correspondence concerning this matter to the following: IRIS M BRICENO					
		Firm/Company	Person Impany Tode Inture annual report notification) A Code Daytime Telephone Number Filing Fee & S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) Street Address: Registration Section			
	18117 BISCAYNE BLVD	3112				
		Address				
	AVENTURA, FL 33160					
		City/State and Zip Code				
	E-mail address: (to be used for future annual report notifi	ication)			
For further information c	oncerning this matter, please c	all:				
IRIS M BRICENO						
Name e	f Person	Area Code Daytime	Telephone Number			
Enclosed is a check for the	he following amount:					
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy			
Mailing Address Possistration			tion			
Registration Division of C		Division of Corporations				
P.O. Box 632		The Centre of Th				
Tallahassee.			e Street. Suite 810			
		Tallahassee, FL				

ARTICLES OF AMENDMENT TO ARTICLES OF ORCANIZATION

ARTICLES OF ORGANIZATION FINANCIAL OF SECRETAR OR OR OR OR OF THE OR OF THE ORGANIZATION ORGANIZ

ON FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

DHA IMPORT LLC

22 APR 22 AM 9: 02

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

Florida document number 1.22000129596	 ·						
This amendment is submitted to amend the fol	lowing:						
A. If amending name, enter the new name	of the limited liab	oility company her	<u>e</u> :				
NA							
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	ignation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if appli	cable:	NA					
(Principal office address MUST BE A STRE	ET ADDRESS)						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address agent and/or the New Registered Agent:	registered office	NA 	ords, <u>enter the name of the new register</u> e				
New Registered Office Address:	NA						
	e words "Limited Liability Company," the designation "LLC" or the abbre licable: NA NA NA NA Enter Florida street address NA Florida NA NA NA Florida NA Florida NA NA NA NA Florida NA NA NA NA Florida NA NA Florida NA NA NA Florida NA NA NA NA NA NA NA NA NA N	a street address					
	NA		Florida NA				
		C nţv	Zip Code				
New Registered Agent's Signature, if changing	Registered Agent:						
I know her manner they make interest and manner that			pacity. I further agree to comply with th y duties, and I am familiar with and				

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
AMBR	DIONY ABBAS	18117 BISCAYNE BLVD, #3112	≣ Add
		AVENTURA, FL 33160	□Remove
			☐ Change
AMBR	ANDRY SIVIRA	18117 BISCAYNE BLVD, #3112	≣ Add
		AVENTURA, FL 33160	□Remove
			□ Change
NA	NA	NA	
		 	□Remove
			□Change
NA	NA	NA	□Add
			Remove
			□Change
NA	NA	NA	□ Add
			□Remove
NA	NA	NA	□Add
			□Remove
			□Change

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Effective	e date, if other tive date is listed.	than the o	late of fili	ing:	ha prior to	lato of filing	or more than	op) Jave aft	tional) er filing) t	hirenant to 60	i5 620°
Note: lt	the date inserte	d in this blo	ck does no	t meet the	applicabl	e statutory	filing requ	rements, t	iis date w	ill not be lis	ted as
document	t's effective dat	e on the De	partment o	f State's re	ecords.						
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Al Dated	PRIL 15TH			2022							
12/11/											
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_		;	Signature of	a member	or authoriz	ceno ed represen	ative of a m	ember			

Page 3 of 3