Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H22000419274 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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1.

Account Name : ARIMIR SERVICES GROUP LLC

Account Number : I20200000022 Phone : (305)298-6579

Fax Number : (305)643-5225

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DAGER CAPITAL ENTERPRISE LLC

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December 14, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DAGER CAPITAL ENTERPRISE LLC 18331 PINES BLVD OF 171 PEMBROKE PINES, FL 33029US

SUBJECT: DAGER CAPITAL ENTERPRISE LLC

REF: L22000439834

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Agnes Lunt Regulatory Specialist III FAX Aud. #: H22000419274 Letter Number: 722A00027828

9 03 H22000419274

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



DAGER (CAPITAL	ENTERPRISE LLO	-
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(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	y were filed on 10/12/2022 and assigned
Florida document number L22000439834	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
PAPER PACKAGING SOLUTIONS LLC	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	19421 SW 14 ST
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES, FL 33029
Enter new mailing address, if applicable:	19421 SW 14 ST
(Mailing address MAY BE A POST OFFICE BOX)	PEMPROBE PINE, FL 33029
(Mailing address MAY BE A POST OFFICE BOX)	PEMPROBE PINE, FL 33029
B. If amending the registered agent and/or registered office a	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registe
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new regist
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new regist

IIprovisions 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 ————	ALBERTO ISSA	19421 SW 14 ST	□Add
		PEMBROKE PINES, FL 33029	⊒Remove
			■ Change
MGR	DAGER ANDRES	19421 SW 14 ST	bba_
		PEMBROKE PINES, FL 33029	□Remove
			■ Change
			□ Add
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			□ Remove
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			□ Change
			□ Add
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D. Ham	rending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: 1	tre date, if other than the date of filing: (optional) crive 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) f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
f the record ecord is file	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 d.
Dated _	DECEMBER, 14 ,
	A HES Felipe DR928. Signature of a member or authorized representative of a member
	ANDRES DAGER Typed or printed name of signee