

11/30/22, 10:21 AM

Division of Corporations

# L22000470400

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H220004031373)))



H220004031373ABCW

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BARTNAS & ASSOCIATES INC.  
Account Number : I20000000082  
Phone : (305)871-0889  
Fax Number : (305)870-9623

2022 NOV 30 AM 11:27

FILING OFFICE  
DIVISION OF CORPORATIONS

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

Email Address: \_\_\_\_\_

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN D&H KENDALL RESEARCH CENTER LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

DEC 01 2022

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

DocuSign Envelope ID: 2B2BF818-A4B2-4EB0-BB98-B24503D8293F

**COVER LETTER****TO: Registration Section  
Division of Corporations****D&H KENDALL RESEARCH CENTER LLC****SUBJECT:** \_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**YANELLE M BARINAS**\_\_\_\_\_  
Name of Person**BARINAS & ASSOCIATES, INC.**\_\_\_\_\_  
Firm/Company**5701 NW 36 ST**\_\_\_\_\_  
Address**VIRGINIA GARDENS, FL 33166**\_\_\_\_\_  
City/State and Zip Code**BARINASB@GMAIL.COM**\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**YANELLE M BARINAS****305 871-0889**\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee☒ \$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 ADDRESS:**Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**STREET/COURIER ADDRESS:**Registration Section  
Division of Corporations  
Chilton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

DocuSign Envelope ID: 2B2BF818-A4B2-4EB0-BB98-B24503D8293F

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

2022 NOV 30 AM 11:27  
FILED  
CLERK OF CIRCUIT COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE COUNTY OF DADE, FLORIDA

D&amp;H KENDALL RESEARCH CENTER 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 11/02/2022 and assigned  
Florida document number L22000470400.

This amendment is submitted to amend the following:

**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 "L.L.C."

Enter new principal offices address, if applicable:

(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, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

D&H NATIONAL RESEARCH CENTERS INC

New Registered Office Address:

8485 BIRD ROAD STE 307

*Enter Florida street address*

DORAL

Florida 33178

*City*

*Zip Code*

**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.*

DocuSigned by:

*Gabriel Dietz*

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 2B2BF818-A4B2-4EB0-BB98-B24503D8293F

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>	<u>Type of Action</u>
MGR	D&H National Research Centers Inc	8485 BIRD ROAD STE 307	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33155	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	D&H National Research Center LLC	8485 BIRD ROAD, STE. 307	<input type="checkbox"/> Add
		MIAMI, FL 33155	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

DocuSign Envelope ID: 2B2BF818-A4B2-4E80-BB98-B24503D8293F

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

2022 NOV 30 AM 11:27

## 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)

**Note:** 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.

Dated \_\_\_\_\_

DocuSigned by:

Gabriel Dietsch

Signature of a member or authorized representative of a member

GABRIEL DIETSCH

Typed or printed name of signer