

L24000022792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

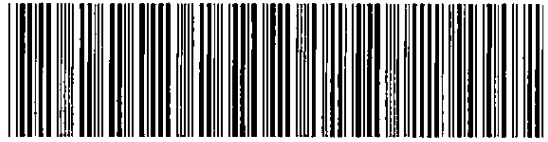
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

R. HUNT  
6/11/24

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

GLOBAL IMAGING EXPORTS 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 01/10/2024 and assigned Florida document number L24000022792.

This amendment is submitted to amend the following:

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

DSN PRODUCTS LLC

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:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_  
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.*

\_\_\_\_\_  
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>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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**Affidavit**

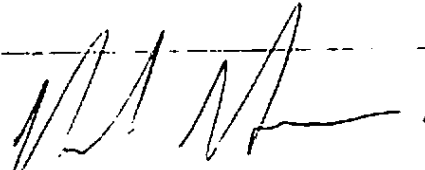
**I, Hamid Hassan, owner of DSN Products Inc., hereby declare under oath as follows:**

1. **Affiant's Information:**
  - o My name is Hamid Hassan.
  - o I am the owner of DSN Products Inc.
2. **Company Information:**
  - o DSN Products Inc. is a corporation duly incorporated under the laws of state of Florida, USA, having its principal place of business at 904 NE 2<sup>ND</sup> Street, Boca Raton, FL 33432
3. **Dissolution of DSN Products Inc.:**
  - o DSN Products Inc. has been dissolved as of June 07, 2024
  - o I have no intention of revoking the dissolution of DSN Products Inc.
4. **Release of Company Name:**
  - o By this affidavit, I hereby release the name "DSN Products Inc." for use by another entity.

I affirm under penalty of perjury that the foregoing is true and correct.

**Dated** this 13 day of June, 2024.

**Hamid Hassan**

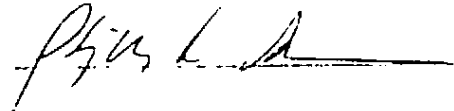


Owner of DSN Products Inc.

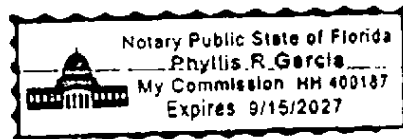
**State of Florida**

**County of Palm Beach**

Subscribed and sworn to (or affirmed) before me on this 13 day of June , 2024, by Hamid Hassan, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.



**Notary Public**



My Commission Expires: [Date] *09/15/2027*