

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
M220000186343

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.

(((I122000186343 3)))



H220001863433ABC\$

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 : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)328-4774

****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
DWBH LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2022 MAY 26 AM 11:33

APPROVED
AND
FILED
2022 MAY 26 PM 1:34

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: DWBH LLC

Enter new principal office address, if applicable:

(Principal office address
MUST BE A STREET ADDRESS)

1028 88TH STREET
SURFSIDE, FL 33154

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

1028 88TH STREET
SURFSIDE, FL 33154

2. The Florida document number of this limited liability company is: _____

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: APRIL 22, 2022

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: BIBIANA ALVAREZ

New Registered Office Address: 1028 88TH STREET

Enter Florida Street Address

SURFSIDE

City

33154

Florida

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.

/s/ Bibiana Alvarez

If Changing Registered Agent, Signature of New Registered Agent

APPROVED
AND
FILED

2022 MAY 26 PM 1:34
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
DADE COUNTY, FLORIDA

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

REMOVING THE MEMBERS

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
M	JORDAN SIBERRY	8 THE GREEN STE 11473	<input type="checkbox"/> Add
		DOVER, DE 19901	<input checked="" type="checkbox"/> Remove
M	OLIVER CAUDRON	8 THE GREEN STE 11473	<input type="checkbox"/> Add
		DOVER, DE 19901	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

/s/ Bibiana Alvarez

Signature of the authorized representative

BIBIANA ALVAREZ

Typed or printed name of signee