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B. BOSTICK

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EXAMINEk

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	Name of Limited Liability Company
The en	osed Articles of Amendment and fee(s) are submitted for filing.
Please	turn all correspondence concerning this matter to the following:
	Arvinder Bajaj Name of Person
	1114 Ocean LLC Firm/Company
	6825 West Sunvisie Blud
	Plantation "FL 33313 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fur	er information concerning this matter, please call: Area Code & Daytime Telephone Number Company Co
	is a check for the following amount: 0 Filing Fee \$\int \\$30.00 \text{ Filing Fee & Certificate of Status}\$ Certificate of Status \$\int \text{Certified Copy (additional copy is enclosed)}\$ 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)							
(A Florida Limited Liability Company)							
The Articles of Organization for this Limited Liability Company were filed on Feb 6, 3008 and assigned							
Florida document number \(\subseteq 08000\lambda 347\).							
This amendment is submitted to amend the follow	/ing:						
A. If amending name, enter the new name of the limited liability company here:							
The new name must be distinguishable and end with t "L.L.C."	the words "Limited	Liability Compa	ny," the designation "	LLC" or the abbreviation			
Enter new principal offices address, if applicab	ıle:	1,205	10 8	ansie Blod.			
	_		ation, FL				
(Principal office address MUST BE A STREET.	<u>ADDRESS)</u> _	Plante	alion, Fh	222/2			
Enter new mailing address, if applicable:	_						
(Mailing address MAY BE A POST OFFICE BO							
	_ _						
	_	•		57 2 50			
B. If amending the registered agent and/or	registered office	address on o	ur records, enter i	್ಷಾ ದು the name_of the new			
registered agent and/or the new registered office		dures on o					
				25 25			
Name of New Registered Agent:	\mathcal{M}^{ϵ}	0//002	Pacheci	21 5 4 5 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
Name of New Registered Agent.							
New Registered Office Address:	ournise 131	ud					
New Registered Office Address: New Registered Office Address Superior Blad							
	Plant	ation	. Florida	33313			
(lity		Zip Code			
New Registered Agent's Signature, if changing Reg	gistered Agent:						
I hereby accept the appointment as registered of the provisions of all statutes relative to the pro-							

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action ARVINDERS.
BATAT MORM ☐ Add ☐ Remove ☐ Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 2 of 2

Filing Fee: \$25,00