

LD9000049216

Florida Department of State
Division of Corporations
Public Access System

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.

((H09000156294 3)))



H090001562943ABC3

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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

09 JUL -2 AM 8:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

OCEAN PALMS OF HOOLYWOOD LLC

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

RECEIVED

09 JUL -2 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H09000156294

FILED

09 JUL -2 AM 8:41

SECRETARY OF STATE
TALLAHASSEE FLORIDA

OCEAN PALMS OF HOLLYWOOD 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 05/20/2009 and assigned
Florida document number L09000049216

This amendment is submitted to amend the following:

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

OCEAN PALMS OF HOLLYWOOD, LLC

The new name must be distinguishable and end with 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)

1101 POLK STREET
HOLLYWOOD, FLORIDA 33019

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1101 POLK STREET
HOLLYWOOD, FLORIDA 33019

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 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 Changing Registered Agent, Signature of New Registered Agent

H09000156294

H09000156294

If amending the Manager/s 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	Name	Address	Type of Action
MGR	VERDU, OCEAN MANUEL	1101 POLK STREET HOLLYWOOD, FLORIDA 33019	<input checked="" type="checkbox"/> Add <input 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated _____

Signature of a member or authorized representative of a member

Sebastia Capuletus
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

H09000156294

09 JUL -2 AM 8:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED