115000047688

(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	WAIT MA	JL.
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
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Office Use Only



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2018 NOV 30 PH 3: 48

DEC 5 11

S. PRATHER



November 1, 2018

RODNEY CAULDER ONACE46, LLC 1300 STONEHAVEN CT WILMINGTON, NC 28411

SUBJECT: ONACE46, LLC Ref. Number: L15000047688

We have received your document for ONACE46, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Missing page 3 of the Amendment Form

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather Regulatory Specialist III

Letter Number: 618A00022605



September 4, 2018

RODNEY L CAULDER 1300 STONEHAVEN COURT WILMINGTON, NC 28411

SUBJECT: ONACE46, LLC Ref. Number: L15000047688

We have received your document for ONACE46, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 718A00018279

Michelle Milligan Senior Section Administrator

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

ONACE 46 LCC			
(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 3-17-2015	and ass	igned	
Florida document number <u> 476000 476</u> 88	- ()	20	
This amendment is submitted to amend the following:		2018 NOV 30	"-7
A. If amending name, enter the new name of the limited liability company here:		မ	-
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the ab	\$55 1. J.	<u>-0</u>	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the ab	presistion "L	ι.c	Cana
Enter new principal offices address, if applicable: (Principal office address MUST RE 4 STREET 4DDRESS)		<u>œ</u> —	_
(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 registered agent and/or the new registered office address here:			-
Name of New Registered Agent: Name of New Registered Agent:			_
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: Enter Florida street address			_
, 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 agr	ec to comp	ly with	h 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>	Name	<u>Address</u>	Type of Action
AMBR	CONNIE CAULDER	1300 Stone haven Ct	& TAdd
		1300 Stone haven Ct Wilmington, NC. 28411	Remove
			Change
_			Add
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Signature of a member or authorized representative of a member	If amending any other information, enter change(s) here: (Attach additional sheets, if nec	C3347 j . 7		
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Page 3 of 3

Filing Fee: \$25.00