

L10000039488
Florida Department of State
Division of Corporations
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.

((H21000367752 3)))



H210003677523ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

2021 OCT -1 AM 10:28

TO: DIVISION OF CORPORATIONS
FROM: TALLAHASSEE, FLORIDA

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : ABITOS PLLC
Account Number : I20200000189
Phone : (305)774-2945
Fax Number : (305)774-1504

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 OCT -1 PM 1:54

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OCEAN 590, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

OCT - 4 2021
S. PRATHER

DocuSign Envelope ID: F2B50DCB-9085-43A6-90AF-0838FBFE5A60

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ocean 590 LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dolores Urdapilleta

Name of Person

Urdapilleta Real Estate LLC

Firm/Company

104 Crandon Blvd, Unit 415

Address

Key Biscayne, FL 33149

City/State and Zip Code

dolores.urdapilleta@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dolores Urdapilleta

Name of Person

at (**305**)

Area Code

790 9946

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

DocuSign Envelope ID: F2B5DDCB-9085-43A6-90AF-0838FBFE5A60

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ocean 590 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

2021 OCT -1 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/12/2010 and

Florida document number L 10000039488

This amendment is submitted to amend the following:

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

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:

104 Crandon Blvd #415

(Principal office address MUST BE A STREET ADDRESS)

Key Biscayne, Fl - 33149

Enter new mailing address, if applicable:

104 Crandon Blvd #415

(Mailing address MAY BE A POST OFFICE BOX)

Key Biscayne, Fl - 33149

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:

Dolores Urdapilleta

New Registered Office Address:

104 Crandon Blvd. #415

Enter Florida street address

Key Biscayne, Fl

Florida

33149

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.

DocuSigned by:

Dolores Urdapilleta

If Changing Registered Agent: Signature of New Registered Agent

DocuSign Envelope ID: F2B5DDCB-9085-43A6-90AF-0838FBFE5A60

in 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>
MGR	Dolores Urdapilleta	104 Crandon Blvd. #415 - Key Biscayne FL - 33149	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gustavo Gambino	2929 SW 3rd Ave Suite 210 - Miami FL 33129	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

DocuSign Envelope ID: F2B5DDCB-9085-43A6-90AF-0838FBFE5A6D

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

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Sept. 29, 2021.

- DocuSigned by:

Signature of a member or authorized representative of a member

Gustavo Gambino

Typed or printed name of signer

FILED
2021 OCT -1 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00